

Administrative Package Cover Page

This file contains the following documents:

- 1. Summary of application (in plain language)
 - English
 - Alternative Language (Spanish)
- 2. First Notice (NORI-Notice of Receipt of Application and Intent to Obtain a Permit)
 - English
 - Alternative Language (Spanish)
- 3. Application materials



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

- 1. Resumen en lenguaje sencillo (PLS, por sus siglas en inglés) de la actividad propuesta
 - Inglés
 - Idioma alternativo (español)
- 2. Primer aviso (NORI, por sus siglas en inglés)
 - Inglés
 - Idioma alternativo (español)
- 3. Solicitud original

Domestic Wastewater TLAP Renewal application

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.

Land application of domestic wastewater from the facility are expected to contain fiveday biochemical oxygen demand (BOD₅), total suspended solids (TSS), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, an equalization basin, an aeration basin, a final clarifier, an aerobic sludge digester, tertiary filters, and a chlorine contact chamber. In addition, the facility includes a temporary storage that equals to at least three days of the daily average flow.

Maverick County (600640015) operates the Radar Base Wastewater Treatment plant (RN<u>101607224</u>), a pond system operation. The facility is located at approximately 4,300 feet southeast of the intersection of U.S Highway 277 and state Highway 131, in Eagle Pass, Maverick County, Texas 78852. This application is for a renewal to dispose a daily average flow not to exceed 0.10 MGD in the interim phase and 0.20 MGD in the final phase of treated domestic wastewater via subsurface irrigation of non-public access land with a minimum area of 30 acres for interim phase and 60 acres for final phase. This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD₅),. Domestic water is treated by one facultative lagoon, two stabilization ponds and one storage pond in intermit phase and in final phase all units will be duplicated.

Solicitud de Renovación de Permiso TLAP para Aguas Residuales Domésticas

A continuación se presenta un resumen de la solicitud de permiso pendiente de calidad del agua, actualmente en revisión por parte de la Comisión de Calidad Ambiental de Texas (Texas Commission on Environmental Quality – TCEQ), conforme a lo requerido por el Capítulo 39 del Código Administrativo de Texas. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no constituye representaciones exigibles a nivel federal del contenido de la solicitud de permiso.

La aplicación en tierra de aguas residuales domésticas de esta instalación se espera que contenga demanda bioquímica de oxígeno a cinco días (DBO5), sólidos suspendidos totales (SST) y Escherichia coli. Contaminantes adicionales potenciales están incluidos en el Informe Técnico Doméstico 1.0, Sección 7. Análisis de Contaminantes del Efluente Tratado, incluido en el paquete de la solicitud del permiso. Las aguas residuales domésticas se tratan mediante un proceso de lodos activados, y las unidades de tratamiento incluyen una rejilla de barras, un tanque de igualación, un tanque de aireación, un clarificador final, un digestor aeróbico de lodos, filtros terciarios y una cámara de contacto con cloro. Además, la instalación incluye un almacenamiento temporal con capacidad para al menos tres días del flujo promedio diario.

El Condado de Maverick (600640015) opera la planta de tratamiento de aguas residuales Radar Base (RN101607224), mediante un sistema de estanques. La instalación se encuentra aproximadamente a 4,300 pies al sureste de la intersección de la autopista U.S. 277 y la carretera estatal 131, en Eagle Pass, Condado de Maverick, Texas 78852. Esta solicitud es para renovar el permiso de disposición de aguas residuales domésticas tratadas con un flujo promedio diario que no exceda 0.10 MGD en la fase intermedia y 0.20 MGD en la fase final, mediante irrigación subterránea en terrenos sin acceso público, con un área mínima de 30 acres en la fase intermedia y 60 acres en la fase final. Este permiso no autoriza la descarga de contaminantes en cuerpos de agua del estado.

Se espera que los efluentes de la instalación contengan demanda bioquímica de oxígeno a cinco días (DBO5). El tratamiento de las aguas residuales domésticas se realiza mediante una laguna facultativa, dos estanques de estabilización y un estanque de almacenamiento en la fase intermedia. En la fase final, todas las unidades serán duplicadas.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



NOTICE OF RECEIPT OF APPLICATION AND INTENT TO OBTAIN WATER QUALITY PERMIT RENEWAL

PERMIT NO. WQ0013716001

APPLICATION. Maverick County, 500 Quarry Street, Suite 3, Eagle Pass, Texas 78852, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Land Application Permit (TLAP) No. WQ0013716001 to authorize the disposal of treated wastewater at a volume not to exceed a daily average flow of 200,000 gallons per day via surface irrigation on 60 acres of non-public access land. The domestic wastewater treatment facility and disposal area are located approximately 4,300 feet southeast of the intersection of U.S. Highway 277 and State Highway 131, near the city of Eagle Pass, in Maverick County, Texas 78852. TCEQ received this application on April 10, 2025. The permit application will be available for viewing and copying at Maverick County Courthouse, County Judge's Office, 500 Quarry Street, Suite 3, Eagle Pass, in Maverick County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

<u>https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications</u>. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-100.535555,28.856666&level=18

ALTERNATIVE LANGUAGE NOTICE. Alternative language notice in Spanish is available at: <u>https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications</u>. El aviso de idioma alternativo en español está disponible en <u>https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications</u>.

ADDITIONAL NOTICE. TCEQ's Executive Director has determined the application is administratively complete and will conduct a technical review of the application. After technical review of the application is complete, the Executive Director may prepare a draft permit and will issue a preliminary decision on the application. **Notice of the Application and Preliminary Decision will be published and mailed to those who are on the county-wide mailing list and to those who are on the mailing list for this application. That notice will contain the deadline for submitting public comments.**

PUBLIC COMMENT / PUBLIC MEETING. You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

OPPORTUNITY FOR A CONTESTED CASE HEARING. After the deadline for submitting public comments, the Executive Director will consider all timely comments and prepare a response to all relevant and material, or significant public comments. **Unless the application is directly referred for a contested case hearing, the response to comments, and the Executive Director's decision on the application, will be mailed to everyone who submitted public comments and to those persons who are on the mailing list for this application. If comments are received, the mailing will also provide instructions for requesting reconsideration of the Executive Director's decision and for requesting a contested case hearing. A contested case hearing is a legal proceeding similar to a civil trial in state district court.**

TO REQUEST A CONTESTED CASE HEARING, YOU MUST INCLUDE THE FOLLOWING ITEMS IN YOUR REQUEST: your name, address, phone number; applicant's name and proposed permit number; the location and distance of your property/activities relative to the proposed facility; a specific description of how you would be adversely affected by the facility in a way not common to the general public; a list of all disputed issues of fact that you submit during the comment period and, the statement "[I/we] request a contested case hearing." If the request for contested case hearing is filed on behalf of a group or association, the request must designate the group's representative for receiving future correspondence; identify by name and physical address an individual member of the group who would be adversely affected by the proposed facility or activity; provide the information discussed above regarding the affected member's location and distance from the facility or activity; explain how and why the member would be affected; and explain how the interests the group seeks to protect are relevant to the group's purpose.

Following the close of all applicable comment and request periods, the Executive Director will forward the application and any requests for reconsideration or for a contested case hearing to the TCEQ Commissioners for their consideration at a scheduled Commission meeting.

The Commission may only grant a request for a contested case hearing on issues the requestor submitted in their timely comments that were not subsequently withdrawn. If a hearing is granted, the subject of a hearing will be limited to disputed issues of fact or mixed questions of fact and law relating to relevant and material water quality concerns submitted during the comment period.

TCEQ may act on an application to renew a permit for discharge of wastewater without providing an opportunity for a contested case hearing if certain criteria are met.

MAILING LIST. If you submit public comments, a request for a contested case hearing or a reconsideration of the Executive Director's decision, you will be added to the mailing list for this specific application to receive future public notices mailed by the Office of the Chief Clerk. In addition, you may request to be placed on: (1) the permanent mailing list for a specific applicant name and permit number; and/or (2) the mailing list for a specific county. If you wish to be placed on the permanent and/or the county mailing list, clearly specify which list(s) and send your request to TCEQ Office of the Chief Clerk at the address below.

INFORMATION AVAILABLE ONLINE. For details about the status of the application, visit the Commissioners' Integrated Database at <u>www.tceq.texas.gov/goto/cid</u>. Search the database using the permit number for this application, which is provided at the top of this notice.

AGENCY CONTACTS AND INFORMATION. All public comments and requests must be submitted either electronically at <u>https://www14.tceq.texas.gov/epic/eComment/</u>, or in writing to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Please be aware that any contact information you provide, including your name, phone number, email address and physical address will become part of the agency's public record. For more information about this permit application or the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at <u>www.tceq.texas.gov/goto/pep</u>. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from Maverick County at the address stated above or by calling Mr. Ernie Hernandez, Water Works Operator, at 830-773-4747.

Issuance Date: May 2, 2025

Comisión de Calidad Ambiental del Estado de Texas



AVISO DE RECIBO DE LA SOLICITUD E INTENCION DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA RENOVACION

PERMISO NO. WQ0013716001

SOLICITUD. Maverick County, 500 Quarry Street, Suite 3, Eagle Pass, Texas 78852, ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) para renovar el Permiso No. WQ0013716001 de disposición de aguas residuales para autorizar la disposición de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 200,000 galones por día mediante irrigación superficial en 60 acres de terreno sin acceso público. La planta de tratamiento de aguas domésticos residuales y el área de disposición están ubicados aproximadamente 4,300 pies al sureste de la intersección de U.S. Highway 277 y State Highway 131, cerca de la ciudad de Eagle Pass, en el Condado de Maverick, Texas 78852. La TCEO recibió esta solicitud el 10 de abril de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Maverick County Courthouse, County Judge's Office, 500 Ouarry Street, Suite 3, Eagle Pass, en el Condado de Maverick, Texas antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta. consulte la solicitud.

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-100.535555,28.856666&level=18

AVISO DE IDIOMA ALTERNATIVO. El aviso de idioma alternativo en español está disponible en <u>https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications</u>.

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar comentarios públicos o pedir una reunión pública sobre esta solicitud. El propósito de una reunión pública es dar la oportunidad de presentar comentarios o hacer preguntas acerca de la solicitud. La TCEQ realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO. Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso. Una audiencia administrativa de lo contencioso una audiencia administrativa de lo contencioso del Director Ejecutivo legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

PARA SOLICITAR UNA AUDIENCIA DE CASO IMPUGNADO, USTED DEBE INCLUIR EN SU SOLICITUD LOS SIGUIENTES DATOS: su nombre, dirección, y número de teléfono; el nombre del solicitante y número del permiso; la ubicación y distancia de su propiedad/actividad con respecto a la instalación; una descripción específica de la forma cómo usted sería afectado adversamente por el sitio de una manera no común al público en general; una lista de todas las cuestiones de hecho en disputa que usted presente durante el período de comentarios; y la declaración "[Yo/nosotros] solicito/solicitamos una audiencia de caso impugnado". Si presenta la petición para una audiencia de caso impugnado de parte de un grupo o asociación, debe identificar una persona que representa al grupo para recibir correspondencia en el futuro; identificar el nombre y la dirección de un miembro del grupo que sería afectado adversamente por la planta o la actividad propuesta; proveer la información indicada anteriormente con respecto a la ubicación del miembro afectado y su distancia de la planta o actividad propuesta; explicar cómo y porqué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión.

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en <u>www.tceq.texas.gov/goto/cid</u>. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

CONTACTOS E INFORMACIÓN A LA AGENCIA. Todos los comentarios públicos y solicitudes deben ser presentadas electrónicamente vía

http://www14.tceq.texas.gov/epic/eComment/ o por escrito dirigidos a la Comisión de Texas de Calidad Ambiental, Oficial de la Secretaría (Office of Chief Clerk), MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Tenga en cuenta que cualquier información personal que usted proporcione, incluyendo su nombre, número de teléfono, dirección de correo electrónico y dirección física pasarán a formar parte del registro público de la Agencia. Para obtener más información acerca de esta solicitud de permiso o el proceso de permisos, llame al programa de educación pública de la TCEQ, gratis, al 1-800-687-4040. Si desea información en Español, puede llamar al 1-800-687-4040.

También se puede obtener información adicional del Condado de Maverick a la dirección indicada arriba o llamando a Ernie Hernandez al 830-773-4747

Fecha de emisión: 2 de mayo de 2025

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Maverick County

PERMIT NUMBER (If new, leave blank): WQ00<u>wQ0013716001</u>

Indicate if each of the following items is included in your application.

Ν

Y

	1	IN
Administrative Report 1.0	\boxtimes	
Administrative Report 1.1		\boxtimes
SPIF	\boxtimes	
Core Data Form	\boxtimes	
Summary of Application (PLS)	\boxtimes	
Public Involvement Plan Form	\boxtimes	
Technical Report 1.0	\boxtimes	
Technical Report 1.1		\boxtimes
Worksheet 2.0		\boxtimes
Worksheet 2.1		\boxtimes
Worksheet 3.0	\boxtimes	
Worksheet 3.1		\boxtimes
Worksheet 3.2		\boxtimes
Worksheet 3.3		\boxtimes
Worksheet 4.0		\boxtimes
Worksheet 5.0		\boxtimes
Worksheet 6.0	\boxtimes	
Worksheet 7.0		\boxtimes

		-
Original USGS Map	\boxtimes	
Affected Landowners Map		\boxtimes
Landowner Disk or Labels		\boxtimes
Buffer Zone Map		\boxtimes
Flow Diagram	\boxtimes	
Site Drawing	\boxtimes	
Original Photographs		\boxtimes
Design Calculations		\boxtimes
Solids Management Plan		\boxtimes
Water Balance		\boxtimes

Y

Ν

For TCEQ Use Only

Segment Number _	County
0	Region
Permit Number	~



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

For any questions about this form, please contact the Applications Review and Processing Team at 512-239-4671.

Section 1. Application Fees (Instructions Page 26)

Indicate the amount submitted for the application fee (check only one).

Flow	New/Major Amendment	Renewal
<0.05 MGD	\$350.00 🗆	\$315.00 🗆
≥0.05 but <0.10 MGD	\$550.00 🗆	\$515.00
≥0.10 but <0.25 MGD	\$850.00 	\$815.00 ⊠
≥0.25 but <0.50 MGD	\$1,250.00 🗆	\$1,215.00 🗆
≥0.50 but <1.0 MGD	\$1,650.00 □	\$1,615.00 🗆
≥1.0 MGD	\$2,050.00	\$2,015.00 🗆

Minor Amendment (for any flow) 150.00

Payment Information:

Mailed	Mailed Check/Money Order Number: <u>100882</u>	
Check/Money Order Amount: <u>815.00</u>		<u>5.00</u>
	Name Printed on Check: Maveric	<u> County</u>
EPAY	Voucher Number: <u>N/A</u>	
Copy of Payment Voucher enclosed? Yes ⊠		

Section 2. Type of Application (Instructions Page 26)

- **a.** Check the box next to the appropriate authorization type.
 - Publicly Owned Domestic Wastewater
 - Privately-Owned Domestic Wastewater
 - □ Conventional Water Treatment
- **b.** Check the box next to the appropriate facility status.
 - \boxtimes Active \square Inactive

- **c.** Check the box next to the appropriate permit type.
 - □ TPDES Permit
 - ⊠ TLAP
 - □ TPDES Permit with TLAP component
 - Subsurface Area Drip Dispersal System (SADDS)
- **d.** Check the box next to the appropriate application type
 - □ New

 \boxtimes

- □ Major Amendment *with* Renewal □ Minor Amendment *with* Renewal
- □ Major Amendment <u>without</u> Renewal

Minor Amendment without Renewal

e. For amendments or modifications, describe the proposed changes: Click to enter text.

f. For existing permits:

Permit Number: WQ00 <u>WQ0013716001</u> EPA I.D. (TPDES only): TX Click to enter text.

Expiration Date: September 15, 2025

Section 3. Facility Owner (Applicant) and Co-Applicant Information (Instructions Page 26)

A. The owner of the facility must apply for the permit.

What is the Legal Name of the entity (applicant) applying for this permit?

Maverick County

(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal documents forming the entity.)

If the applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at <u>http://www15.tceq.texas.gov/crpub/</u>

CN: <u>600640015</u>

What is the name and title of the person signing the application? The person must be an executive official meeting signatory requirements in *30 TAC § 305.44*.

Prefix: Judge Last Name, First Name: Ramsey English Cantu

Title: County JudgeCredential: N/A

B. Co-applicant information. Complete this section only if another person or entity is required to apply as a co-permittee.

What is the Legal Name of the co-applicant applying for this permit?

<u>N/A</u>

(The legal name must be spelled exactly as filed with the TX SOS, with the County, or in the legal documents forming the entity.)

If the co-applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at: <u>http://www15.tceq.texas.gov/crpub/</u>

CN: <u>N/A</u>

What is the name and title of the person signing the application? The person must be an executive official meeting signatory requirements in *30 TAC § 305.44*.

Prefix: <u>N/A</u>	Last Name, First Name: <u>N/A</u>
Title: <u>N/A</u>	Credential: <u>N/A</u>

Provide a brief description of the need for a co-permittee: N/A

C. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of Administrative Report 1.0. <u>Attachment 2</u>

Section 4. Application Contact Information (Instructions Page 27)

This is the person(s) TCEQ will contact if additional information is needed about this application. Provide a contact for administrative questions and technical questions.

A.	Prefix: <u>Miss</u>	Last Name, First Name: <u>Natali</u>	a Rod	<u>riguez</u>
	Title: <u>Consultant</u>	Credential: Click to enter text		
	Organization Name: <u>ECG</u>			
	Mailing Address: <u>921 E 800 S</u>	City, State, Zip Cod	e: <u>Salt</u>	<u>t Lake City</u>
	Phone No.: <u>832-776-5393</u>	E-mail Address: <u>natalia@envi</u>	ronme	entalcgroup.com
	Check one or both: \square Ad	ministrative Contact	\boxtimes	Technical Contact
B.	3. Prefix: <u>Mr.</u> Last Name, First Name: <u>Ernie Hernandez</u>			dez
	Title: <u>County Water Works Operator</u> Credential: <u>n/a</u>			
	Organization Name: <u>Maverick County</u>			
	Organization Name: <u>Maverick Co</u>	ounty		
	Organization Name: <u>Maverick Co</u> Mailing Address: <u>500 Quarry Stree</u>	•	e: <u>Eag</u>	le Pass, TX 78852
	Ū.	•	-	
	Mailing Address: <u>500 Quarry Stree</u> Phone No.: <u>830-352-4281</u>	t <u>Suite 3</u> City, State, Zip Cod	-	

Section 5. Permit Contact Information (Instructions Page 27)

Provide the names and contact information for two individuals that can be contacted throughout the permit term.

A.	Prefix: <u>Mr.</u>	Last Name	e, First Name: <u>Ernie Hernandez</u>
	Title: County Water Works Operator	Credential	: Click to enter text.
	Organization Name: Maverick Cou	<u>nty</u>	
	Mailing Address: 500 Quarry Street S	Suite 3	City, State, Zip Code: Eagle Pass, TX 78852
	Phone No.: <u>830-352-4281</u>	E-mail Ad	ldress: <u>ehdz68@yahoo.com</u>

B.	Prefix: <u>Mr.</u>	Last Nam	e, First Name: <u>Jesse Parra</u>
	Title: County Water Works	Credentia	l: Click to enter text.
	Organization Name: Maverick Cou	<u>inty</u>	
	Mailing Address: 500 Quarry Street	Suite 3	City, State, Zip Code: Eagle Pass, TX 78852
	Phone No.: 830-352-4281	E-mail A	ddress: jesseparra14@gmail.com

Section 6. Billing Contact Information (Instructions Page 27)

The permittee is responsible for paying the annual fee. The annual fee will be assessed to permits *in effect on September 1 of each year*. The TCEQ will send a bill to the address provided in this section. The permittee is responsible for terminating the permit when it is no longer needed (using form TCEQ-20029).

Prefix: <u>Mrs.</u>	Last Name, First Name: <u>Jessica Gonzalez</u>
Title: Administrative Assistant	Credential: Click to enter text.
Organization Name: Maverick Cou	unty
Mailing Address: 500 Quarry Street	Suite 3 City, State, Zip Code: Eagle Pass, TX 78852
Phone No.: <u>830-773-1716</u>	E-mail Address: jessica.gonzalez@co.maverick.tx.us

Section 7. DMR/MER Contact Information (Instructions Page 27)

Provide the name and complete mailing address of the person delegated to receive and submit Discharge Monitoring Reports (DMR) (EPA 3320-1) or maintain Monthly Effluent Reports (MER).

Prefix: <u>Mr.</u>	Last Name	e, First Name: <u>Ernie Hernandez</u>
Title: County Water Works Operator	Credentia	l: Click to enter text.
Organization Name: Maverick Cou	<u>inty</u>	
Mailing Address: 500 Quarry Street	Suite 3	City, State, Zip Code: Eagle Pass, TX 78852
Phone No.: <u>830-773-4747</u>	E-mail Ac	ddress: waterplantoperator@co.maverick.tx.us

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: <u>Miss.</u>	Last Name, First Name: <u>Natalia Rodriguez</u>
Title: <u>Consultant</u>	Credential: Click to enter text.
Organization Name: <u>ECG</u>	
Mailing Address: <u>921 E 800 S</u>	City, State, Zip Code: <u>Salt Lake City, UT 84102</u>
Phone No.: <u>832-776-5393</u>	E-mail Address: <u>natalia@environmentalCgroup.com</u>

B. Method for Receiving Notice of Receipt and Intent to Obtain a Water Quality Permit Package

Indicate by a check mark the preferred method for receiving the first notice and instructions:

- ⊠ E-mail Address
- 🗆 Fax
- □ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: <u>Mr.</u> Last Name, First Name: <u>Ernie Hernandez</u>

Title: County Water Works operator Credential: Click to enter text.

Organization Name: <u>Maverick County</u>

Mailing Address: 500 Quarry Street Suite 3 City, State, Zip Code: Eagle Pass, TX 78852

Phone No.: <u>830-773-4747</u> E-mail Address: <u>ehdz68@yahoo.com</u>

D. Public Viewing Information

If the facility or outfall is located in more than one county, a public viewing place for each county must be provided.

Public building name: County Courthouse, County Judge's Office

Location within the building: Jessica Parra desk

Physical Address of Building: 500 Quarry Street, Suite 3

City: <u>Eagle Pass</u> County: <u>Maverick</u>

Contact (Last Name, First Name): <u>Jessica Parra</u>

Phone No.: <u>830-773-1716</u> Ext.: Click to enter text.

E. Bilingual Notice Requirements

This information **is required** for **new, major amendment, minor amendment or minor modification, and renewal** applications.

This section of the application is only used to determine if alternative language notices will be needed. Complete instructions on publishing the alternative language notices will be in your public notice package.

Please call the bilingual/ESL coordinator at the nearest elementary and middle schools and obtain the following information to determine whether an alternative language notices are required.

1. Is a bilingual education program required by the Texas Education Code at the elementary or middle school nearest to the facility or proposed facility?

🖾 Yes 🗆 No

If **no**, publication of an alternative language notice is not required; **skip to** Section 9 below.

2. Are the students who attend either the elementary school or the middle school enrolled in a bilingual education program at that school?

🖾 Yes 🗆 No

3. Do the students at these schools attend a bilingual education program at another location?

🖾 Yes 🗆 No

4. Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?

🖾 Yes 🗆 No

5. If the answer is **yes** to **question 1, 2, 3, or 4**, public notices in an alternative language are required. Which language is required by the bilingual program? Click to enter text.

F. Summary of Application in Plain Language Template

Complete the F. Summary of Application in Plain Language Template (TCEQ Form 20972), also known as the plain language summary or PLS, and include as an attachment.

Attachment: Attachment 3

G. Public Involvement Plan Form

Complete the Public Involvement Plan Form (TCEQ Form 20960) for each application for a **new permit or major amendment to a permit** and include as an attachment.

Attachment: <u>N/A</u>

Section 9. Regulated Entity and Permitted Site Information (Instructions Page 29)

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. **RN** <u>101607224</u>

Search the TCEQ's Central Registry at <u>http://www15.tceq.texas.gov/crpub/</u> to determine if the site is currently regulated by TCEQ.

Private

Both

Federal

B. Name of project or site (the name known by the community where located):

Radar Base Wastewater Treatment Plant

C. Owner of treatment facility: <u>Maverick County</u>

Ownership of Facility:	\boxtimes	Public
------------------------	-------------	--------

D. Owner of land where treatment facility is or will be:

Prefix: <u>n/a</u> Last Name, First Name: <u>n/a</u>

Title: n/aCredential: n/a

Organization Name: <u>Maverick County</u>

Mailing Address: <u>500 Quarry Street, Suite 3</u> City, State, Zip Code: <u>Eagle Pass, TX 78852</u>

Phone No.: <u>830-773-1716</u> E-mail Address: <u>jessica.gonzalez@co.maverick.tx.us</u>

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

Attachment: <u>n/a</u>

E. Owner of effluent disposal site:

Prefix: <u>n/a</u>	Last Nam	ie, First Name: <u>n/a</u>
Title: <u>n/a</u>	Credentia	al: <u>n/a</u>
Organization Name: Maverick Cou	<u>inty</u>	
Mailing Address: 500 Quarry Stree	et, Suite 3	City, State, Zip Code: Eagle Pass, TX 78852
Phone No.: <u>830-773-1716</u>	E-mail A	ddress: <u>jessica.gonzalez@co.maverick.tx.us</u>

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

Attachment: <u>n/a</u>

F. Owner sewage sludge disposal site (if authorization is requested for sludge disposal on property owned or controlled by the applicant)::

Prefix: <u>n/a</u>	Last Name, First Name: <u>n/a</u>
Title: <u>n/a</u>	Credential: <u>n/a</u>
Organization Name: <u>n/a</u>	
Mailing Address: <u>n/a</u>	City, State, Zip Code: <u>n./</u>
Phone No.: <u>n/a</u>	E-mail Address: <u>n/a</u>

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

Attachment: <u>n/a</u>

Section 10. TPDES Discharge Information (Instructions Page 31)

A. Is the wastewater treatment facility location in the existing permit accurate?

🗆 Yes 🗆 No

If **no**, **or a new permit application**, please give an accurate description:

Click to enter text.

B. Are the point(s) of discharge and the discharge route(s) in the existing permit correct?

Yes	No

If **no**, **or a new or amendment permit application**, provide an accurate description of the point of discharge and the discharge route to the nearest classified segment as defined in 30 TAC Chapter 307:

Click to enter text.

City nearest the outfall(s): Click to enter text.

County in which the outfalls(s) is/are located: Click to enter text.

C. Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?

□ Yes □ No

If **yes**, indicate by a check mark if:

□ Authorization granted □ Authorization pending

For **new and amendment** applications, provide copies of letters that show proof of contact and the approval letter upon receipt.

Attachment: Click to enter text.

D. For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: Click to enter text.

Section 11. TLAP Disposal Information (Instructions Page 32)

A. For TLAPs, is the location of the effluent disposal site in the existing permit accurate?

🖾 Yes 🗆 No

If **no, or a new or amendment permit application**, provide an accurate description of the disposal site location:

N/A

- B. City nearest the disposal site: Eagle Pass
- C. County in which the disposal site is located: Maverick
- **D.** For **TLAPs**, describe the routing of effluent from the treatment facility to the disposal site:

Wastewater flows from the treatment plant's stabilization ponds through 12-inch pipe to storage lagoon. The treated effluent is pumped from storage lagoon to land irrigation area using vertical turbine submersible pump to irrigation distribution system.

E. For **TLAPs**, please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: <u>Unnamed tributary and thence to the Rio Grande</u>

Section 12. Miscellaneous Information (Instructions Page 32)

- A. Is the facility located on or does the treated effluent cross American Indian Land?
 - 🗆 Yes 🖾 No
- **B.** If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?

🗆 Yes 🗆 No

☑ Not Applicable

If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.

Click to enter text.

- **C.** Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?
 - 🗆 Yes 🖾 No

If yes, list each person formerly employed by the TCEQ who represented your company and was paid for service regarding the application: Click to enter text.

- **D.** Do you owe any fees to the TCEQ?
 - 🗆 Yes 🖾 No

If **yes**, provide the following information:

Account number: Click to enter text.

Amount past due: Click to enter text.

E. Do you owe any penalties to the TCEQ?

🗆 Yes 🖾 No

If **yes**, please provide the following information:

Enforcement order number: Click to enter text.

Amount past due: Click to enter text.

Section 13. Attachments (Instructions Page 33)

Indicate which attachments are included with the Administrative Report. Check all that apply:

□ Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.

Original full-size USGS Topographic Map with the following information:

- Applicant's property boundary
- Treatment facility boundary
- Labeled point of discharge for each discharge point (TPDES only)
- Highlighted discharge route for each discharge point (TPDES only)
- Onsite sewage sludge disposal site (if applicable)
- Effluent disposal site boundaries (TLAP only)
- New and future construction (if applicable)
- 1 mile radius information
- 3 miles downstream information (TPDES only)
- All ponds.
- □ Attachment 1 for Individuals as co-applicants
- □ Other Attachments. Please specify: Click to enter text.

Section 14. Signature Page (Instructions Page 34)

If co-applicants are necessary, each entity must submit an original, separate signature page. Permit Number: WQ0013716001

Applicant: Maverick County

Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under 30 Texas Administrative Code § 305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signatory name (typed or printed): Judge Ramsey English Cantu	auditor's office
Signatory title: Maveriet County Judge	
Signature:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:	13, 2025
Subscribed and Sworn to before me by the said Ramsey Eusist Ca	INTU

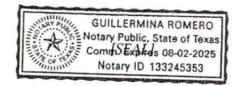
on this	13	day of	MAR		.20 25
My commissi	on expires on th	e_02_	_day of_	AUGUST	, 20_25

non

Notary Public

MADERICK

County, Texas



Approved by

MAR 1 4 2025

Commissioners Court

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

For any questions about this form, please contact the Domestic Wastewater Permitting Team at 512-239-4671.

The following information is required for all renewal, new, and amendment applications.

Section 1. Permitted or Proposed Flows (Instructions Page 42)

A. Existing/Interim I Phase

Design Flow (MGD): <u>0.010</u> 2-Hr Peak Flow (MGD): <u>0.035</u> Estimated construction start date: <u>n/a</u> Estimated waste disposal start date: <u>n/a</u>

B. Interim II Phase

Design Flow (MGD): <u>0.10</u> 2-Hr Peak Flow (MGD): <u>0.25</u> Estimated construction start date: <u>n/a</u> Estimated waste disposal start date: <u>n/a</u>

C. Final Phase

Design Flow (MGD): <u>0.2</u> 2-Hr Peak Flow (MGD): <u>0.7</u> Estimated construction start date: <u>n/a</u> Estimated waste disposal start date: <u>n/</u>

D. Current Operating Phase

Provide the startup date of the facility: Intermit II - 2008

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

Provide a detailed description of the treatment process. **Include the type of treatment plant, mode of operation, and all treatment units.** Start with the plant's head works and

finish with the point of discharge. Include all sludge processing and drying units. **If more than one phase exists or is proposed, a description of** *each phase* **must be provided**.

WW from collection system flows into lift station, and the effluent is pimped to the facultative lagoon as primary solid removal and sludge accumulation/storage. The wastewater gravity flows into to two stabilization ponds to provide aeration. The treated wastewater gravity flows to storage lagoon before being pumped to land irrigation field.

B. Treatment Units

In Table 1.0(1), provide the treatment unit type, the number of units, and dimensions (length, width, depth) **of each treatment unit, accounting for** *all* **phases of operation.**

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Facultative Lagoon	1	490'x175'x6'
Stabilization Pond	2	490'x175'x6'
Storage Lagoon	1	520'x200'x6
Irrigation Field	1	30 Acres

C. Process Flow Diagram

Provide flow diagrams for the existing facilities and **each** proposed phase of construction. **Attachment**: <u>Attachment 6</u>

Section 3. Site Information and Drawing (Instructions Page 43)

Provide the TPDES discharge outfall latitude and longitude. Enter N/A if not applicable.

- Latitude: <u>Click to enter text.</u>
- Longitude: <u>Click to enter text.</u>

Provide the TLAP disposal site latitude and longitude. Enter N/A if not applicable.

- Latitude: <u>28.855875,</u>
- Longitude: <u>-100.531182</u>

Provide a site drawing for the facility that shows the following:

- The boundaries of the treatment facility;
- The boundaries of the area served by the treatment facility;
- If land disposal of effluent, the boundaries of the disposal site and all storage/holding ponds; and
- If sludge disposal is authorized in the permit, the boundaries of the land application or disposal site.

The Maverick County Memorial International Airport. it serves approximately 40 households, several business establishments near the airport, and detention facility built on the County property.

Collection System Information **for wastewater TPDES permits only**: Provide information for each **uniquely owned** collection system, existing and new, served by this facility, including satellite collection systems. **Please see the instructions for a detailed explanation and examples.**

Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 44)

Is the application for a renewal of a permit that contains an unbuilt phase or phases?

🗆 Yes 🗵 No

If yes, does the existing permit contain a phase that has not been constructed within five years of being authorized by the TCEQ?

□ Yes □ No

If yes, provide a detailed discussion regarding the continued need for the unbuilt phase. **Failure to provide sufficient justification may result in the Executive Director recommending denial of the unbuilt phase or phases**.

Click to enter text.		

Section 5. Closure Plans (Instructions Page 44)

Have any treatment units been taken out of service permanently, or will any units be taken out of service in the next five years?

🗆 Yes 🖾 No

If yes, was a closure plan submitted to the TCEQ?

🗆 Yes 🗆 No

If yes, provide a brief description of the closure and the date of plan approval.

Click to enter text.

Section 6. Permit Specific Requirements (Instructions Page 44)

For applicants with an existing permit, check the Other Requirements or Special Provisions of the permit.

A. Summary transmittal

Have plans and specifications been approved for the existing facilities and each proposed phase?

🖾 Yes 🗆 No

If yes, provide the date(s) of approval for each phase: 2008

Provide information, including dates, on any actions taken to meet a *requirement or provision* pertaining to the submission of a summary transmittal letter. **Provide a copy of an approval letter from the TCEQ, if applicable**.

Click to enter text.		

B. Buffer zones

Have the buffer zone requirements been met?

🖾 Yes 🗆 No

Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.

Click to enter text.

C. Other actions required by the current permit

Does the *Other Requirements* or *Special Provisions* section in the existing permit require submission of any other information or other required actions? Examples include Notification of Completion, progress reports, soil monitoring data, etc.

🗆 Yes 🖾 No

If yes, provide information below on the status of any actions taken to meet the conditions of an *Other Requirement* or *Special Provision*.

Click to enter text.		

D. Grit and grease treatment

1. Acceptance of grit and grease waste

Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?

🗆 Yes 🖾 No

If No, stop here and continue with Subsection E. Stormwater Management.

2. Grit and grease processing

Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility.

Click to enter text.		

3. Grit disposal

Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal?

🗆 Yes 🗆 No

If No, contact the TCEQ Municipal Solid Waste team at 512-239-2335. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.



4. Grease and decanted liquid disposal

Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-2335.

Describe how the decant and grease are treated and disposed of after grit separation.

Click to enter text.

E. Stormwater management

1. Applicability

Does the facility have a design flow of 1.0 MGD or greater in any phase?

🗆 Yes 🖾 No

Does the facility have an approved pretreatment program, under 40 CFR Part 403?

🗆 Yes 🖂 No

If no to both of the above, then skip to Subsection F, Other Wastes Received.

2. MSGP coverage

Is the stormwater runoff from the WWTP and dedicated lands for sewage disposal currently permitted under the TPDES Multi-Sector General Permit (MSGP), TXR050000?

🗆 Yes 🗆 No

If yes, please provide MSGP Authorization Number and skip to Subsection F, Other Wastes Received:

TXR05 Click to enter text. or TXRNE Click to enter text.

If no, do you intend to seek coverage under TXR050000?

□ Yes □ No

3. Conditional exclusion

Alternatively, do you intend to apply for a conditional exclusion from permitting based TXR050000 (Multi Sector General Permit) Part II B.2 or TXR050000 (Multi Sector General Permit) Part V, Sector T 3(b)?

🗆 Yes 🗆 No

If yes, please explain below then proceed to Subsection F, Other Wastes Received:

Click to enter text.

4. Existing coverage in individual permit

Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?

🗆 Yes 🗆 No

If yes, provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.

Click to enter text.

5. Zero stormwater discharge

Do you intend to have no discharge of stormwater via use of evaporation or other means?

🗆 Yes 🗆 No

If yes, explain below then skip to Subsection F. Other Wastes Received.

Click to enter text.

Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an individual discharge permit. This requirement applies to all areas of facilities with treatment plants or systems that treat, store, recycle, or reclaim domestic sewage, wastewater or sewage sludge (including dedicated lands for sewage sludge disposal located within the onsite property boundaries) that meet the applicability criteria of above. You have the option of obtaining coverage under the MSGP for direct discharges, (recommended), or obtaining coverage under this individual permit.

6. Request for coverage in individual permit

Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?

🗆 Yes 🗆 No

If yes, provide a description of stormwater runoff management practices at the site for which you are requesting authorization in this individual wastewater permit and describe whether you intend to comingle this discharge with your treated effluent or discharge it via a separate dedicated stormwater outfall. Please also indicate if you

intend to divert stormwater to the treatment plant headworks and indirectly discharge it to water in the state.

Click to enter text.

Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

🗆 Yes 🖂 No

If yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. <u>Click to enter text.</u>

G. Other wastes received including sludge from other WWTPs and septic waste

1. Acceptance of sludge from other WWTPs

Does or will the facility accept sludge from other treatment plants at the facility site?

🗆 Yes 🖾 No

If yes, attach sewage sludge solids management plan. See Example 5 of instructions.

In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an

estimate of the BOD₅ concentration of the sludge, and the design BOD₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

🗆 Yes 🖾 No

If yes, does the facility have a Type V processing unit?

🗆 Yes 🗆 No

If yes, does the unit have a Municipal Solid Waste permit?

🗆 Yes 🗆 No

If yes to any of the above, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the septic waste, and the

design BOD₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

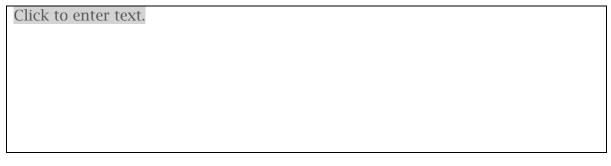
Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.

3. Acceptance of other wastes (not including septic, grease, grit, or RCRA, CERCLA or as discharged by IUs listed in Worksheet 6)

Is or will the facility accept wastes that are not domestic in nature excluding the categories listed above?

🗆 Yes 🖾 No

If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or other physical characteristic of the waste. Also note if this information has or has not changed since the last permit action.



Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 49)

Is the facility in operation?

⊠ Yes □ No

If no, this section is not applicable. Proceed to Section 8.

If yes, provide effluent analysis data for the listed pollutants. *Wastewater treatment facilities* complete Table 1.0(2). W*ater treatment facilities* discharging filter backwash water, complete Table 1.0(3). Provide copies of the laboratory results sheets. **These tables are not applicable for a minor amendment without renewal.** See the instructions for guidance.

Note: The sample date must be within 1 year of application submission.

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
<i>E.coli</i> (CFU/100ml) freshwater					
Entercocci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, µmohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO ₃)*, mg/l *TPDES permits only					

*TPDES permits only

†TLAP permits only

Table1.0(3) – Pollutant Analysis for Water Treatment Facilities

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l					
Total Dissolved Solids, mg/l					
pH, standard units					
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity (CaCO ₃), mg/l					

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: <u>ERNIE HERNANDEZ</u>

Facility Operator's License Classification and Level: Class D

Facility Operator's License Number: <u>WW0016497</u>

Section 9. Sludge and Biosolids Management and Disposal (Instructions Page 50)

A. WWTP's Sewage Sludge or Biosolids Management Facility Type

Check all that apply. See instructions for guidance

- \Box Design flow>= 1 MGD
- \Box Serves >= 10,000 people
- □ Class I Sludge Management Facility (per 40 CFR § 503.9)
- □ Biosolids generator
- □ Biosolids end user land application (onsite)
- □ Biosolids end user surface disposal (onsite)
- □ Biosolids end user incinerator (onsite)

B. WWTP's Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

- □ Aerobic Digestion
- Air Drying (or sludge drying beds)
- □ Lower Temperature Composting
- □ Lime Stabilization
- □ Higher Temperature Composting
- □ Heat Drying
- □ Thermophilic Aerobic Digestion
- □ Beta Ray Irradiation
- □ Gamma Ray Irradiation
- □ Pasteurization
- □ Preliminary Operation (e.g. grinding, de-gritting, blending)
- Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
- □ Sludge Lagoon
- □ Temporary Storage (< 2 years)
- □ Long Term Storage (>= 2 years)
- □ Methane or Biogas Recovery
- □ Other Treatment Process: <u>Click to enter text.</u>

C. Sewage Sludge or Biosolids Management

Provide information on the *intended* sewage sludge or biosolids management practice. Do not enter every management practice that you want authorized in the permit, as the

permit will authorize all sewage sludge or biosolids management practices listed in the instructions. Rather indicate the management practice the facility plans to use.

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): <u>Click to enter text.</u>

D. Disposal site

Disposal site name: There is no sludge being generated.

TCEQ permit or registration number: <u>N/A</u>

County where disposal site is located: N/A

E. Transportation method

Method of transportation (truck, train, pipe, other): There is no sludge being generated

Name of the hauler: <u>N/A</u>

Hauler registration number: <u>N/A</u>

Sludge is transported as a:

Liquid 🗆

] semi-liquid □

semi-solid 🗆

solid 🗆

Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 52)

A. Beneficial use authorization

Does the existing permit include authorization for land application of biosolids for beneficial use?

🗆 Yes 🖂 No

If yes, are you requesting to continue this authorization to land apply biosolids for beneficial use?

🗆 Yes 🗆 No

If yes, is the completed **Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)** attached to this permit application (see the instructions for details)?

□ Yes □ No

B. Sludge processing authorization

Does the existing permit include authorization for any of the following sludge processing, storage or disposal options?

Sludge Composting	Yes	\boxtimes	No
Marketing and Distribution of Biosolids	Yes	\boxtimes	No
Sludge Surface Disposal or Sludge Monofill	Yes	\boxtimes	No
Temporary storage in sludge lagoons	Yes	\boxtimes	No

If yes to any of the above sludge options and the applicant is requesting to continue this authorization, is the completed **Domestic Wastewater Permit Application: Sewage Sludge Technical Report (TCEQ Form No. 10056)** attached to this permit application?

🗆 Yes 🗆 No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

🗆 Yes 🖂 No

If yes, complete the remainder of this section. If no, proceed to Section 12.

A. Location information

The following maps are required to be submitted as part of the application. For each map, provide the Attachment Number.

• Original General Highway (County) Map:

Attachment: Click to enter text.

• USDA Natural Resources Conservation Service Soil Map:

Attachment: Click to enter text.

• Federal Emergency Management Map:

Attachment: Click to enter text.

• Site map:

Attachment: Click to enter text.

Discuss in a description if any of the following exist within the lagoon area. Check all that apply.

- Overlap a designated 100-year frequency flood plain
- □ Soils with flooding classification
- □ Overlap an unstable area
- □ Wetlands
- □ Located less than 60 meters from a fault
- \Box None of the above

Attachment: Click to enter text.

If a portion of the lagoon(s) is located within the 100-year frequency flood plain, provide the protective measures to be utilized including type and size of protective structures:

Click to enter text.

B. Temporary storage information

Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in *Section 7 of Technical Report 1.0.*

Nitrate Nitrogen, mg/kg: <u>Click to enter text.</u>

Total Kjeldahl Nitrogen, mg/kg: <u>Click to enter text.</u>

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: Click to enter text.

Phosphorus, mg/kg: <u>Click to enter text.</u>

Potassium, mg/kg: <u>Click to enter text.</u>

pH, standard units: <u>Click to enter text.</u>

Ammonia Nitrogen mg/kg: <u>Click to enter text.</u>

Arsenic: Click to enter text.

Cadmium: <u>Click to enter text.</u>

Chromium: Click to enter text.

Copper: <u>Click to enter text.</u>

Lead: <u>Click to enter text.</u>

Mercury: Click to enter text.

Molybdenum: <u>Click to enter text.</u>

Nickel: Click to enter text.

Selenium: Click to enter text.

Zinc: Click to enter text.

Total PCBs: <u>Click to enter text</u>.

Provide the following information:

Volume and frequency of sludge to the lagoon(s): <u>Click to enter text.</u>

Total dry tons stored in the lagoons(s) per 365-day period: <u>Click to enter text.</u>

Total dry tons stored in the lagoons(s) over the life of the unit: <u>Click to enter text.</u>

C. Liner information

Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of 1×10^{-7} cm/sec?

□ Yes □ No

Click to enter text.

D. Site development plan

Provide a detailed description of the methods used to deposit sludge in the lagoon(s):

Click to enter text.			
Attach the following	do our our to th	a annliastian	

ttach the following documents to the application.

- Plan view and cross-section of the sludge lagoon(s) Attachment: Click to enter text.
- Copy of the closure plan Attachment: Click to enter text.
- Copy of deed recordation for the site Attachment: Click to enter text.
- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons Attachment: Click to enter text.
- Description of the method of controlling infiltration of groundwater and surface water from entering the site

Attachment: Click to enter text.

Procedures to prevent the occurrence of nuisance conditions

Attachment: Click to enter text.

E. Groundwater monitoring

Is groundwater monitoring currently conducted at this site, or are any wells available for groundwater monitoring, or are groundwater monitoring data otherwise available for the sludge lagoon(s)?

Yes 🗆 No

If groundwater monitoring data are available, provide a copy. Provide a profile of soil types encountered down to the groundwater table and the depth to the shallowest groundwater as a separate attachment.

Attachment: Click to enter text.

Section 12. Authorizations/Compliance/Enforcement (Instructions

Page 54)

A. Additional authorizations

Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?

🗆 Yes 🖾 No

If yes, provide the TCEQ authorization number and description of the authorization:

C	lick to enter text.			
B.	Permittee enforce	ment status		

Is the permittee currently under enforcement for this facility?

🗆 Yes 🖾 No

Is the permittee required to meet an implementation schedule for compliance or enforcement?

🗆 Yes 🖾 No

If yes to either question, provide a brief summary of the enforcement, the implementation schedule, and the current status:

Click to enter text.

Section 13. RCRA/CERCLA Wastes (Instructions Page 55)

A. RCRA hazardous wastes

Has the facility received in the past three years, does it currently receive, or will it receive RCRA hazardous waste?

🗆 Yes 🖾 No

B. Remediation activity wastewater

Has the facility received in the past three years, does it currently receive, or will it receive CERCLA wastewater, RCRA remediation/corrective action wastewater or other remediation activity wastewater?

🗆 Yes 🖾 No

C. Details about wastes received

If yes to either Subsection A or B above, provide detailed information concerning these wastes with the application.

Attachment: Click to enter text.

Section 14. Laboratory Accreditation (Instructions Page 55)

All laboratory tests performed must meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*, which includes the following general exemptions from National Environmental Laboratory Accreditation Program (NELAP) certification requirements:

- The laboratory is an in-house laboratory and is:
 - \circ periodically inspected by the TCEQ; or
 - o located in another state and is accredited or inspected by that state; or
 - \circ performing work for another company with a unit located in the same site; or
 - performing pro bono work for a governmental agency or charitable organization.
- The laboratory is accredited under federal law.
- The data are needed for emergency-response activities, and a laboratory accredited under the Texas Laboratory Accreditation Program is not available.
- The laboratory supplies data for which the TCEQ does not offer accreditation.

The applicant should review 30 TAC Chapter 25 for specific requirements.

The following certification statement shall be signed and submitted with every application. See the Signature Page section in the Instructions, for a list of designated representatives who may sign the certification.

CERTIFICATION:

I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification.*

Printed Name: Natalia Rodriguez

Title: <u>Consultant</u>

Signature:

Date: <u>4/9/25</u>_____

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.0: LAND DISPOSAL OF EFFLUENT

The following is required for renewal, new, and amendment permit applications.

Section 1. Type of Disposal System (Instructions Page 67)

Identify the method of land disposal:

Irrigation

 \boxtimes

	Surface application		Subsurface application
--	---------------------	--	------------------------

- Subsurface soils absorption
- Drip irrigation system
 Subsurface area drip dispersal system
- □ Evaporation □ Evapotranspiration beds
- □ Other (describe in detail): <u>Click to enter text.</u>

NOTE: All applicants without authorization or proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0.

For existing authorizations, provide Registration Number: Click to enter text.

Section 2. Land Application Site(s) (Instructions Page 67)

In table 3.0(1), provide the requested information for the land application sites. Include the agricultural or cover crop type (wheat, cotton, alfalfa, bermuda grass, native grasses, etc.), land use (golf course, hayland, pastureland, park, row crop, etc.), irrigation area, amount of effluent applied, and whether or not the public has access to the area. Specify the amount of land area and the amount of effluent that will be allotted to each agricultural or cover crop, if more than one crop will be used.

Table 3.0(1) – Land Application Site Crops

Crop Type & Land Use	Irrigation Area (acres)	Effluent Application (GPD)	Public Access? Y/N
Coastal Bermuda grass, alfalfa and other ground cover (interim phase)	30	100,000	N
Coastal Bermuda grass, alfalfa and other ground cover (final phase)	60	200,000	N

Section 3. Storage and Evaporation Lagoons/Ponds (Instructions Page 67)

Pond Number	Surface Area (acres)	Storage Volume (acre-feet)	Dimensions	Liner Type
1	2.38	14	500'X200'X6'	2' Compacted clay
2	2.38	14	500'X200'X6'	2' Compacted clay

Table 3.0(2) – Storage and Evaporation Ponds

Attach a copy of a liner certification that was prepared, signed, and sealed by a Texas licensed professional engineer for each pond.

Attachment:

Section 4. Flood and Runoff Protection (Instructions Page 67)

Is the land application site within the 100-year frequency flood level?

🗆 Yes 🖾 No

If yes, describe how the site will be protected from inundation.

Click to enter text.

Provide the source used to determine the 100-year frequency flood level:

FEMA Map #480470-0007-A

Provide a description of tailwater controls and rainfall run-on controls used for the land application site.

Interceptor swales are installed in the upland areas to capture run-on and divert storm water around the irrigation area. Tailwater control berms will be installed at down gradient area to capture over irrigated water and control runoff of irrigated effluent during rain event.

Section 5. Annual Cropping Plan (Instructions Page 67)

Attach an Annual Cropping Plan which includes a discussion of each of the following items. If not applicable, provide a detailed explanation indicating why. Attachment: <u>Attachment 8</u>

- Soils map with crops
- Cool and warm season plant species
- Crop yield goals
- Crop growing season
- Crop nutrient requirements
- Additional fertilizer requirements
- Minimum/maximum harvest height (for grass crops)
- Supplemental watering requirements
- Crop salt tolerances
- Harvesting method/number of harvests
- Justification for not removing existing vegetation to be irrigated

Section 6. Well and Map Information (Instructions Page 68)

Attach a USGS map with the following information shown and labeled. If not applicable, provide a detailed explanation indicating why. **Attachment**: <u>Attachment 9</u>

- The boundaries of the land application site(s)
- Waste disposal or treatment facility site(s)
- On-site buildings
- Buffer zones
- Effluent storage and tailwater control facilities
- All water wells within 1-mile radius of the disposal site or property boundaries
- All springs and seeps onsite and within 500 feet of the property boundaries
- All surface waters in the state onsite and within 500 feet of the property boundaries
- All faults and sinkholes onsite and within 500 feet of the property

List and cross reference all water wells located within a half-mile radius of the disposal site or property boundaries shown on the USGS map in the following table. Attach additional pages as necessary to include all of the wells.

Well ID	Well Use	Producing? Y/N	Open, cased, capped, or plugged?	Proposed Best Management Practice
76-12-302	stock	UNK	Cased	Buffer zone met, water testing regularly.
76-12-301	domestic	UNK	Cased	Buffer zone met, water testing regularly.
			Choose an item.	
			Choose an item.	
			Choose an item.	

Table 3.0(3) – Water Well Data

If water quality data or well log information is available please include the information in an attachment listed by Well ID.

Attachment: attachment 10

Section 7. Groundwater Quality (Instructions Page 68)

Attach a Groundwater Quality Technical Report which assesses the impact of the wastewater disposal system on groundwater. This report shall include an evaluation of the water wells (including the information in the well table provided in Item 6. above), the wastewater application rate, and pond liners. Indicate by a check mark that this report is provided.

Attachment: Water has not been irrigated yet. All the discharge is evaporated,

Are groundwater monitoring wells available onsite? \Box Yes \boxtimes No

Do you plan to install ground water monitoring wells or lysimeters around the land application site?
Ves No

If yes, provide the proposed location of the monitoring wells or lysimeters on a site map.

Attachment: Click to enter text.

Section 8. Soil Map and Soil Analyses (Instructions Page 69)

A. Soil map

Attach a USDA Soil Survey map that shows the area to be used for effluent disposal.

Attachment: Attachment 11

B. Soil analyses

Attach the laboratory results sheets from the soil analyses. **Note**: for renewal applications, the current annual soil analyses required by the permit are acceptable as long as the test date is less than one year prior to the submission of the application.

Attachment: Water has not been irrigated yet. All the discharge is evaporated,

List all USDA designated soil series on the proposed land application site. Attach additional pages as necessary.

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number
Elindio Association	0-6	0.60-2.0	0.15-0.20	unknown
	6-18	0.60-2.0	0.15-0.20	unknown
	18-30	0.60-2.0	0.15-0.20	unknown
Jimenes association, rolling	0-9	0.15-0.20	0.05-0.10	unknown
	9-18			
	18-60			

Table 3.0(4) - Soil Data

Section 9. Effluent Monitoring Data (Instructions Page 70)

Is the facility in operation?

🖾 Yes 🗆 No

If no, this section is not applicable and the worksheet is complete.

If yes, provide the effluent monitoring data for the parameters regulated in the existing permit. If a parameter is not regulated in the existing permit, enter N/A.

Table 3.0(5) – Effluent Monitoring Data

Date	30 Day Avg Flow MGD	BOD5 mg/l	TSS mg/l	рН	Chlorine Residual mg/l	Acres irrigated
Due that	Water is	Evapora ted	There is	No	Discharge	0

Provide a discussion of all persistent excursions above the permitted limits and any corrective actions taken.

The water is evaporated in the ponds, so therefore treated effluent is not available for monitoring.

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

Section 1. All POTWs (Instructions Page 87)

A. Industrial users (IUs)

Provide the number of each of the following types of industrial users (IUs) that discharge to your POTW and the daily flows from each user. See the Instructions for definitions of Categorical IUs, Significant IUs – non-categorical, and Other IUs.

If there are no users, enter 0 (zero).

Categorical IUs: Number of IUs: <u>o</u> Average Daily Flows, in MGD: <u>O</u> Significant IUs – non-categorical:

Number of IUs: o

Average Daily Flows, in MGD: <u>o</u>

Other IUs:

Number of IUs: o

Average Daily Flows, in MGD: o

B. Treatment plant interference

In the past three years, has your POTW experienced treatment plant interference (see instructions)?

🗆 Yes 🖾 No

If yes, identify the dates, duration, description of interference, and probable cause(s) and possible source(s) of each interference event. Include the names of the IUs that may have caused the interference.

C. Treatment plant pass through

In the past three years, has your POTW experienced pass through (see instructions)?

🗆 Yes 🖾 No

If yes, identify the dates, duration, a description of the pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass through event. Include the names of the IUs that may have caused pass through.

Click to enter text			

D. Pretreatment program

Does your POTW have an approved pretreatment program?

🗆 Yes 🖾 No

If yes, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

□ Yes □ No

If yes, complete Section 2.c. and 2.d. only, and skip Section 3.

If no to either question above, skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.

Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 87)

A. Substantial modifications

Have there been any **substantial modifications** to the approved pretreatment program that have not been submitted to the TCEQ for approval according to *40 CFR §403.18*?

🗆 Yes 🗵 No

If yes, identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.

B. Non-substantial modifications

Have there been any **non-substantial modifications** to the approved pretreatment program that have not been submitted to TCEQ for review and acceptance?

🗆 Yes 🖂 No

If yes, identify all non-substantial modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

C. Effluent parameters above the MAL

In Table 6.0(1), list all parameters measured above the MAL in the POTW's effluent monitoring during the last three years. Submit an attachment if necessary.

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date

D. Industrial user interruptions

Has any SIU, CIU, or other IU caused or contributed to any problems (excluding interferences or pass throughs) at your POTW in the past three years?

🗆 Yes 🗵 No

If yes, identify the industry, describe each episode, including dates, duration, description of the problems, and probable pollutants.

Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 88)

A. General information

Company Name: <u>n/a</u> SIC Code: <u>n/a</u> Contact name: <u>n/a</u> Address: <u>n/a</u> City, State, and Zip Code: <u>n/a</u> Telephone number: <u>n/a</u> Email address: <u>n/a</u>

B. Process information

Describe the industrial processes or other activities that affect or contribute to the SIU(s) or CIU(s) discharge (i.e., process and non-process wastewater).

n/a

C. Product and service information

Provide a description of the principal product(s) or services performed.

n/a

D. Flow rate information

See the Instructions for definitions of "process" and "non-process wastewater."

Process Wastewater:

Discharge,	in	gallons/	'day:	<u>n/a</u>
------------	----	----------	-------	------------

Discharge Type: 🗆 🛛 🤇	Continuous		Batch		Intermittent				
Non-Process Wastewater:									
Discharge, in gallons/	Discharge, in gallons/day: <u>n/a</u>								
Discharge Type: 🗖 🛛 🤇	Continuous		Batch		Intermittent				

E. Pretreatment standards

Is the SIU or CIU subject to technically based local limits as defined in the *i*nstructions?

🗆 Yes 🖾 No

Is the SIU or CIU subject to categorical pretreatment standards found in *40 CFR Parts 405-471*?

🗆 Yes 🖂 No

If subject to categorical pretreatment standards, indicate the applicable category and subcategory for each categorical process.

Category: Subcategories: Click to enter text.

Click or tap here to enter text. <u>Click to enter text.</u>

Category: Click to enter text.

Subcategories: Click to enter text.

Category: <u>Click to enter text.</u>

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

F. Industrial user interruptions

Has the SIU or CIU caused or contributed to any problems (e.g., interferences, pass through, odors, corrosion, blockages) at your POTW in the past three years?

🗆 Yes 🗵 No

If yes, identify the SIU, describe each episode, including dates, duration, description of problems, and probable pollutants.



TCEQ Core Data Form

For detailed instructions on completing this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)								
New Permit, Registration or Authorization (<i>Core Data Form should be submitted with the program application.</i>)								
Renewal (Core Data Form should be submitted with the	e renewal form)	Other						
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in	3. Regulated Entity Reference Number (if issued)						
CN 600640015	<u>Central Registry**</u>	RN 101607224						

SECTION II: Customer Information

4. General Cu	neral Customer Information 5. Effective Date for Customer Information Updates (mm/dd/yyyy)										
_	New Customer Update to Customer Information Change in Regulated Entity Ownership Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)										
The Custome	r Name sı	ubmitted here may b	be updated aut	omaticall	y base	d on	what is cu	urrent and active	with th	e Texas Seci	retary of State
(SOS) or Texa	s Comptro	oller of Public Accou	nts (CPA).								
6. Customer	Legal Nam	ne (If an individual, prii	nt last name first:	: eg: Doe, Jo	ohn)			If new Customer,	enter pre	vious Custom	er below:
Maverick Coun	ty										
7. TX SOS/CP	A Filing N	umber	8. TX State Ta	x ID (11 di	gits)			9. Federal Tax I	D	10. DUNS applicable)	Number (if
			74-6000702					(9 digits)		appneasiej	
									-		
11. Type of C	ustomer:	Corporat	ion				Individ	lual	Partne	rship: 🗌 Ger	eral 🗌 Limited
		County 🗌 Federal 🗌	Local 🗌 State 🗌] Other			Sole Pr	roprietorship	🗌 Otł	ner:	
12. Number of	of Employ	ees						13. Independer	ntly Owi	ned and Ope	erated?
⊠ 0-20 □ 2	21-100	101-250 251-	500 🗌 501 an	ıd higher				Yes [🛛 No		
14. Customer	Role (Prop	posed or Actual) – <i>as i</i> i	t relates to the Re	gulated En	ntity list	ed on	this form. I	Please check one of	the follo	wing	
Owner Occupation	al Licensee	Operator Responsible Par		er & Operat CP/BSA Appl				Other:			
	500 Quar	rry Street, Suite 3									
15. Mailing											
Address:	City	Eagle Pass		State	тх		ZIP	78852		ZIP + 4	
	City	Eagle Fass		State			211	/0032		216 + 4	
16. Country N	√ailing Inf	formation (if outside	USA)			17. E-Mail Address (if applicable)					
						jessica.gonzalez@co.maverick.tx.us					

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(830) 773-3824		() -

SECTION III: Regulated Entity Information

21. General Regulated Er	ntity Informat	tion (If 'New Regulat	ed Entity" is selec	ted, a new p	ermit appli	cation is also requ	iired.)	
New Regulated Entity	Update to I	Regulated Entity Nan	ne 🗌 Update t	o Regulated	Entity Infor	mation		
The Regulated Entity Nai	me submitted	l mav be updated.	in order to me	et TCEO Co	re Data St	andards (remov	al of organization	al endinas such
		····, ···, ···,						
as Inc, LP, or LLC).								
22. Regulated Entity Nan	ne (Enter name	e of the site where th	e regulated actior	n is taking pla	ace.)			
RN101607224								
	approvimath	y 4,300 feet southeas	t of the intersect	ion of U.S. Hi	abway 277 -	and state Highway	(121	
23. Street Address of	approximation	y 4,500 leet southeas	st of the intersect	011010.311	g11way 277 6	and state mgnway	/ 131	
the Regulated Entity:								
(No PO Boxes)		1		1				
INO TO BOXEST	City	Eagle Pass	State	ТΧ	ZIP	78852	ZIP + 4	
24. County	Maverick	•	•	•	•	•	÷	
24. County	Wavenck							

If no Street Address is provided, fields 25-28 are required.

25. Description to	approximat	ly 4,300 feet southea	ast of the intersect	ion of U.S Hig	ghway 277 ar	nd state Highway 131		
Physical Location:								
26. Nearest City						State	Nea	rest ZIP Code
Latitude/Longitude are re	•	• • •			ata Standa	rds. (Geocoding of	the Physical	Address may be
used to supply coordinate	es where no	ne have been prov	vided or to gain	accuracy).				
27. Latitude (N) In Decima	al:	28°51'20.56"N		28. L	ongitude (V	V) In Decimal:	100°32'8	.13"W
Degrees	Minutes	Se	conds	Degre	es	Minutes		Seconds
29. Primary SIC Code	30.	Secondary SIC Co	de	31. Primai	ry NAICS Co	de 32. Sec	condary NAI	CS Code
(4 digits)	(4 d	igits)		(5 or 6 digi	ts)	(5 or 6 d	digits)	
4952				22132				
33. What is the Primary B	Business of t	his entity? (Do no	ot repeat the SIC of	r NAICS descr	iption.)			
government								
	500 Quarry	y Street, Suite 3						
34. Mailing								
Address:		1	-					1
	City	Eagle Pass	State	тх	ZIP	78852	ZIP + 4	
35. E-Mail Address:	jess	ica.gonzalez@co.ma	verick.tx.us					•
36. Telephone Number	·	3	7. Extension or	Code	38. F	ax Number (if applic	able)	
(830) 773-3824					() -		

* 39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

Dam Safety	Districts	Edwards Aquifer	Emissions Inventory Air	Industrial Hazardous Waste
	New Source			
Municipal Solid Waste	Review Air	□ OSSF	Petroleum Storage Tank	D PWS
Sludge	Storm Water	Title V Air	Tires	Used Oil
Voluntary Cleanup	Wastewater	Wastewater Agriculture	Water Rights	Other:
	WQ0013716001			

SECTION IV: Preparer Information

40. Name:	Natalia Rodr	iguez		41. Title:	Consultant	REGEIVED
42. Telephone	Number	43. Ext./Code	44. Fax Number	45. E-Mai	l Address	MAR 1 3 2025
(832)776-5393			()	natalia@en	wironmentalcgroup.c	com

SECTION V: Authorized Signature

V

Auditor's Office

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	Maverick County	County Judge	_	
Name (In Print):	Judge Ramsey English Cantu		Phone:	(830) 773- 3824
Signature:	AK		Date:	March 13, 2025
	101			1 (10115) 600

Approved by

MAR 1 4 2025

Commissioners Court

Domestic Wastewater TLAP Renewal application

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.

Land application of domestic wastewater from the facility are expected to contain fiveday biochemical oxygen demand (BOD₅), total suspended solids (TSS), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, an equalization basin, an aeration basin, a final clarifier, an aerobic sludge digester, tertiary filters, and a chlorine contact chamber. In addition, the facility includes a temporary storage that equals to at least three days of the daily average flow.

Maverick County (<u>600640015</u>) operates the Radar Base Wastewater Treatment plant (RN<u>101607224</u>), a pond system operation. The facility is located at approximately 4,300 feet southeast of the intersection of U.S Highway 277 and state Highway 131, in Eagle Pass, Maverick County, Texas 78852. This application is for a renewal to dispose a daily average flow not to exceed 0.10 MGD in the interim phase and 0.20 MGD in the final phase of treated domestic wastewater via subsurface irrigation of non-public access land with a minimum area of 30 acres for interim phase and 60 acres for final phase. This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD₅). Domestic water is treated by one facultative lagoon, two stabilization ponds and one storage pond in intermit phase and in final phase all units will be duplicated.

Solicitud de Renovación de Permiso TLAP para Aguas Residuales Domésticas

A continuación se presenta un resumen de la solicitud de permiso pendiente de calidad del agua, actualmente en revisión por parte de la Comisión de Calidad Ambiental de Texas (Texas Commission on Environmental Quality – TCEQ), conforme a lo requerido por el Capítulo 39 del Código Administrativo de Texas. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no constituye representaciones exigibles a nivel federal del contenido de la solicitud de permiso.

La aplicación en tierra de aguas residuales domésticas de esta instalación se espera que contenga demanda bioquímica de oxígeno a cinco días (DBO5), sólidos suspendidos totales (SST) y Escherichia coli. Contaminantes adicionales potenciales están incluidos en el Informe Técnico Doméstico 1.0, Sección 7. Análisis de Contaminantes del Efluente Tratado, incluido en el paquete de la solicitud del permiso. Las aguas residuales domésticas se tratan mediante un proceso de lodos activados, y las unidades de tratamiento incluyen una rejilla de barras, un tanque de igualación, un tanque de aireación, un clarificador final, un digestor aeróbico de lodos, filtros terciarios y una cámara de contacto con cloro. Además, la instalación incluye un almacenamiento temporal con capacidad para al menos tres días del flujo promedio diario.

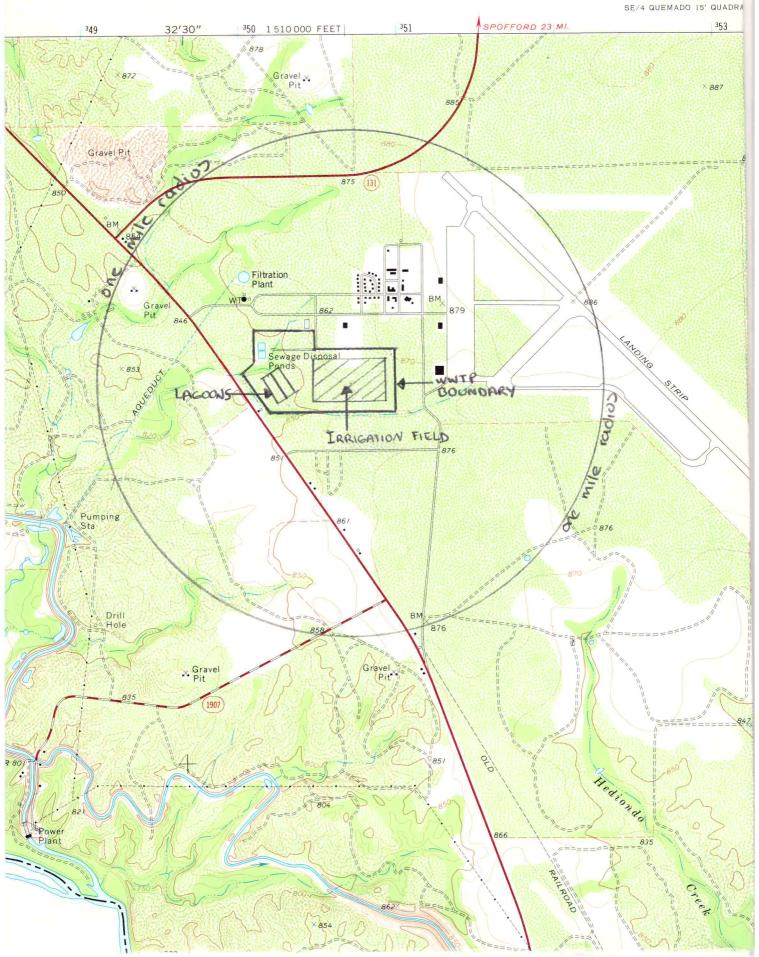
El Condado de Maverick (600640015) opera la planta de tratamiento de aguas residuales Radar Base (RN101607224), mediante un sistema de estanques. La instalación se encuentra aproximadamente a 4,300 pies al sureste de la intersección de la autopista U.S. 277 y la carretera estatal 131, en Eagle Pass, Condado de Maverick, Texas 78852. Esta solicitud es para renovar el permiso de disposición de aguas residuales domésticas tratadas con un flujo promedio diario que no exceda 0.10 MGD en la fase intermedia y 0.20 MGD en la fase final, mediante irrigación subterránea en terrenos sin acceso público, con un área mínima de 30 acres en la fase intermedia y 60 acres en la fase final. Este permiso no autoriza la descarga de contaminantes en cuerpos de agua del estado.

Se espera que los efluentes de la instalación contengan demanda bioquímica de oxígeno a cinco días (DBO5). El tratamiento de las aguas residuales domésticas se realiza mediante una laguna facultativa, dos estanques de estabilización y un estanque de almacenamiento en la fase intermedia. En la fase final, todas las unidades serán duplicadas.

QUEMADO SE QUAD

TEXAS-MAVERICK

7.5 MINUTE SERIES (TOF



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:	
Application type:RenewalMajor Am	endmentNinor AmendmentNew
County:	Segment Number:
Admin Complete Date:	-
Agency Receiving SPIF:	
Texas Historical Commission	U.S. Fish and Wildlife
Texas Parks and Wildlife Department	U.S. Army Corps of Engineers

This form applies to TPDES permit applications only. (Instructions, Page 53)

Complete this form as a separate document. TCEQ will mail a copy to each agency as required by our agreement with EPA. If any of the items are not completely addressed or further information is needed, we will contact you to provide the information before issuing the permit. Address each item completely.

Do not refer to your response to any item in the permit application form. Provide each attachment for this form separately from the Administrative Report of the application. The application will not be declared administratively complete without this SPIF form being completed in its entirety including all attachments. Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at <u>WO-ARPTeam@tceq.texas.gov</u> or by phone at (512) 239-4671.

The following applies to all applications:

1. Permittee: <u>Maverick County</u>

Permit No. WQ00 <u>13716001</u>

EPA ID No. TX <u>Unknown</u>

Address of the project (or a location description that includes street/highway, city/vicinity, and county):

approximately 4,300 feet southeast of the intersection of U.S Highway 277 and state Highway 131

Provide the name, address, phone and fax number of an individual that can be contacted to answer specific questions about the property.

Prefix (Mr., Ms., Miss): <u>Mr.</u>

First and Last Name: Ernie Hernandez

Credential (P.E, P.G., Ph.D., etc.):

Phone No.: 830-352-4281 Ext.:

Title: <u>Operator</u>

Mailing Address: 500 Quarry Street Suite 3

City, State, Zip Code: Eagle Pass, TX 78852

Fax No.:

E-mail Address: <u>ehdz68@yahoo.com</u>

- 2. List the county in which the facility is located: Maverick
- If the property is publicly owned and the owner is different than the permittee/applicant, please list the owner of the property.
 na
- 4. Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.

The wastewater facility and disposal site are located in the drainage of Rio Grande below Amistad Reservoir in segment No.2304 of the Rio Grande Basin

5. Please provide a separate 7.5-minute USGS quadrangle map with the project boundaries plotted and a general location map showing the project area. Please highlight the discharge route from the point of discharge for a distance of one mile downstream. (This map is required in addition to the map in the administrative report).

Provide original photographs of any structures 50 years or older on the property.

Does your project involve any of the following? Check all that apply.

- Proposed access roads, utility lines, construction easements
- □ Visual effects that could damage or detract from a historic property's integrity
- □ Vibration effects during construction or as a result of project design
- Additional phases of development that are planned for the future
- □ Sealing caves, fractures, sinkholes, other karst features

- Disturbance of vegetation or wetlands
- 1. List proposed construction impact (surface acres to be impacted, depth of excavation, sealing of caves, or other karst features):

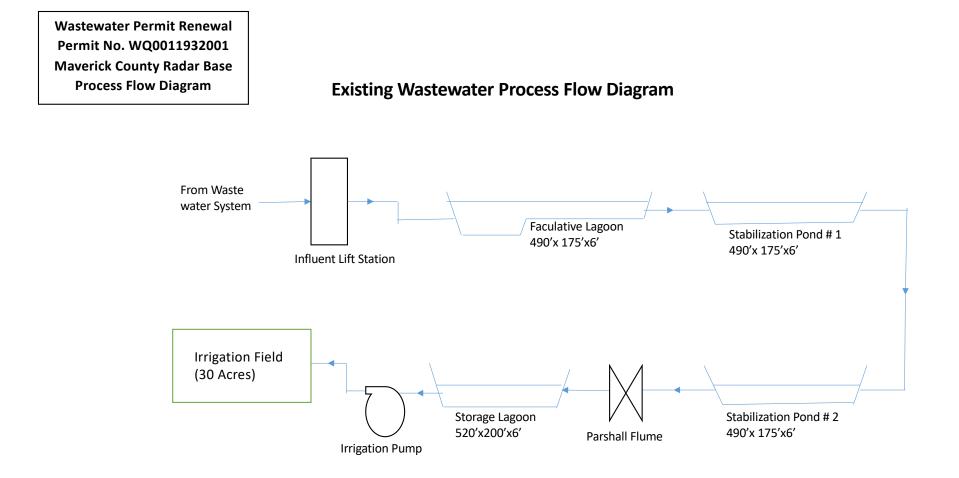
<u>n/a</u>

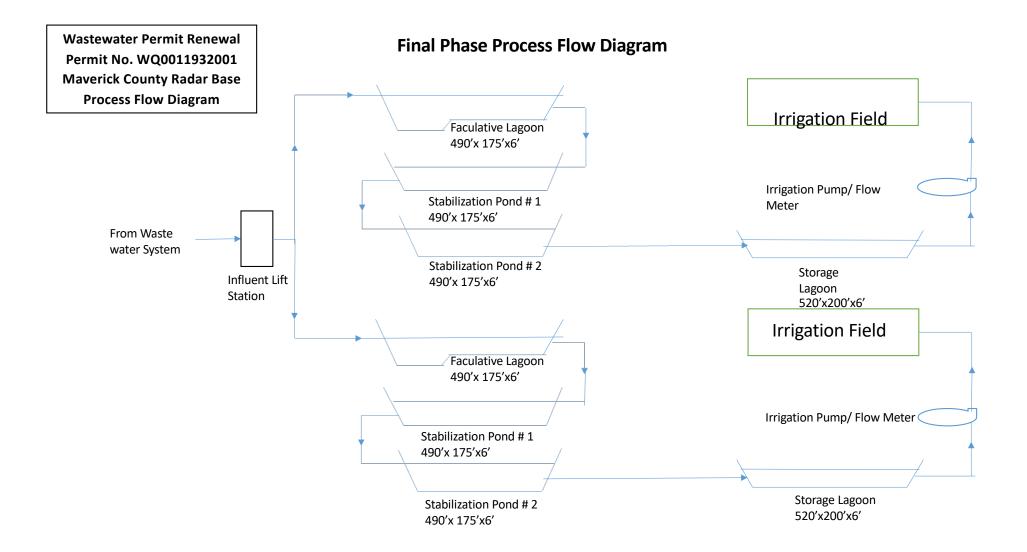
2. Describe existing disturbances, vegetation, and land use: n/a

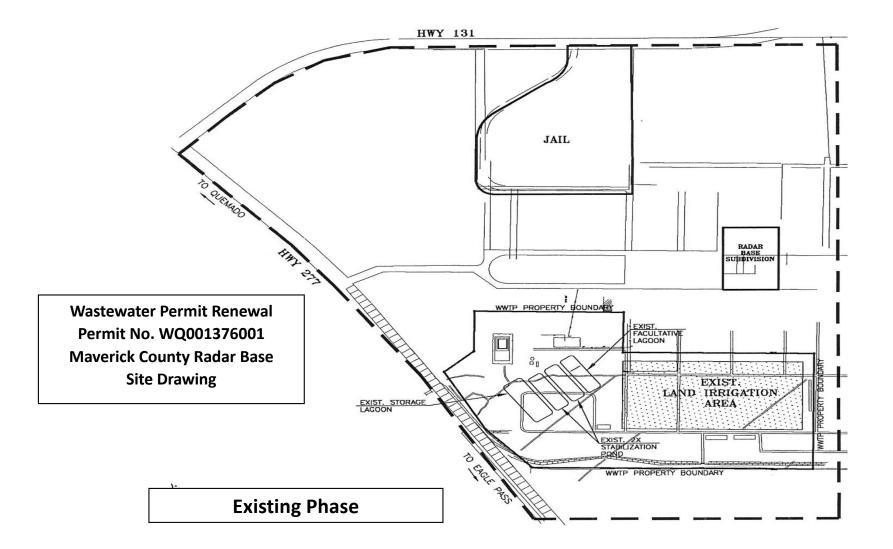
THE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR AMENDMENTS TO TPDES PERMITS

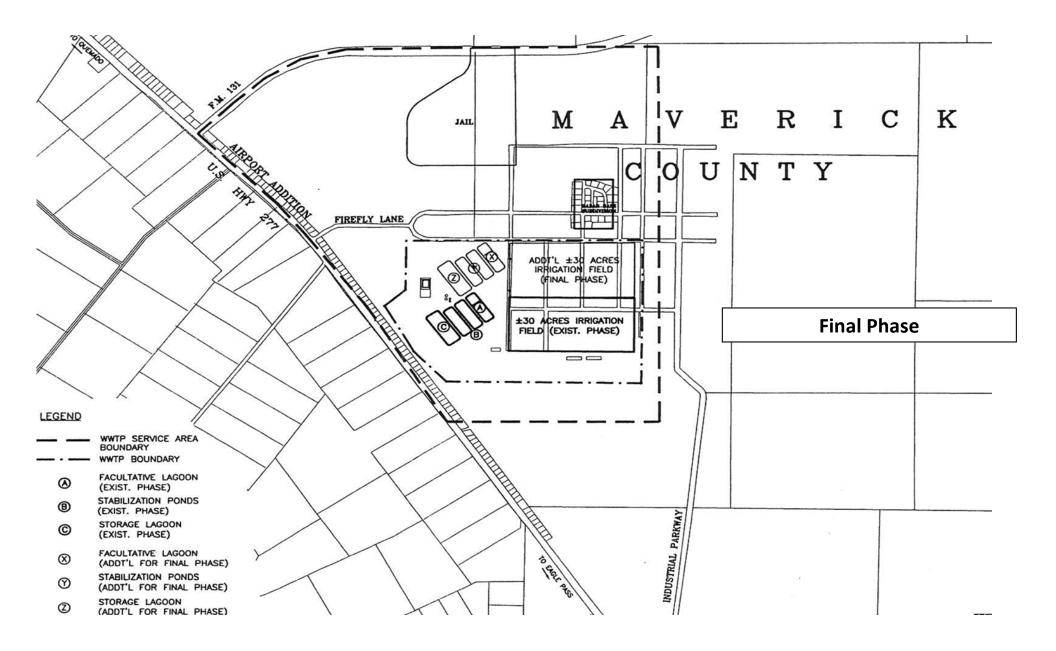
3. List construction dates of all buildings and structures on the property:

4. Provide a brief history of the property, and name of the architect/builder, if known.









MAVERICK COUNTY RADAR BASE WWTP

ANNUAL CROPPING PLAN

a. a. Soil Map:

See Attachment No. 9 for USDA Natural Resources Conservation Service (NRCS) Soil Survey Map

a. b. Type of Grass:

The cropping plan involves with effluent land application on 30-acre vegetated area covered with Bermuda grass and alfalfa for the existing phase, and additional 30-acre of similar vegetation-covered area for the final phase.

a. c. Growing Season of Crop:

Grass will be grown all year round with peak growing period to be expected from February through November.

a. d. Nutrient Requirement of Crop:

The summary of nutrient requirements are shown as below:

Crop	Nitrogen-N	Phosphorous-P ₂ O ₅	Potassium-K ₂ O
	(lbs/ac-harvest)	(lbs/ac-harvest)	(lbs/ac-harvest)
Bermuda Grass	350 - 600	30 - 40	200
Ryegrass	200 - 480	20-30	155 - 200

(Source: Metcalf & Eddy, third edition, Wastewater Engineering, Treatment, Disposal and Reuse, Table 13-6, Nutrient Uptake Rates for Selected Crops)

a. e. Minimum and Maximum Harvest Height of Crop:

The Grass shall be harvested for hay when it reaches 12" - 15" tall

a. f. Supplement Watering Requirements:

None is required

a. g. Salt Tolerances of Crop:

9.5 mmmho/cm with no anticipated reduction yield.
12.0 mmmho/cm with up to 25% reduction in yield.
(Source: 30 TAC 309.20 Table 3. Decrease in yield to be expected for forage and field crops resulting from high electrical conductivity in irrigation water)

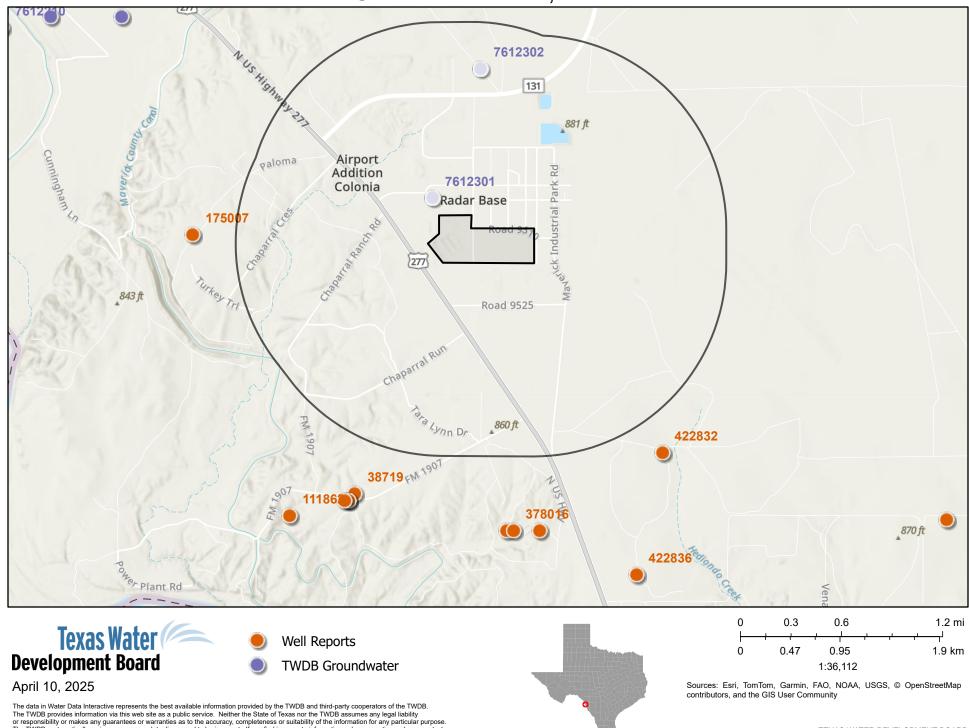
a. h. Harvesting Method and Number of Harvest per Year:

The crop will be harvested every 3-5 weeks depends on weather condition. It should be cut when it reaches 12"- 15" tall.

a. i. Additional Fertilizer Requirement:

None is anticipated at this moment. Soil data such as pH, N, P, K and macronutrients will be collected and analyzed during wet and dry growing season. Additional fertilization will be performed based on the soil testing result.

Groundwater Data, Texas



The TWDB systematically revises or removes data discovered to be incorrect. If you find inaccurate information or have questions, please contact WDI-Support@twdb.texas.gov.



Texas Water Development Board (TWDB) Groundwater Database (GWDB) Well Information Report for State Well Number 76-12-301



GWDB Reports and Downloads

Well Basic Details

Scanned Documents

State Well Number	7612301
County	Maverick
River Basin	Rio Grande
Groundwater Management Area	13
Regional Water Planning Area	M - Rio Grande
Groundwater Conservation District	GCD Does Not Exist
Latitude (decimal degrees)	28.859445
Latitude (degrees minutes seconds)	28° 51' 34" N
Longitude (decimal degrees)	-100.536945
Longitude (degrees minutes seconds)	100° 32' 13" W
Coordinate Source	+/- 1 Second
Aquifer Code	100ALVM - Alluvium
Aquifer	Other
Aquifer Pick Method	
Land Surface Elevation (feet above sea level)	851
Land Surface Elevation Method	Interpolated From Topo Map
Well Depth (feet below land surface)	30
Well Depth Source	Memory of Owner
Drilling Start Date	
Drilling End Date	0/0/1937
Drilling Method	Dug
Borehole Completion	

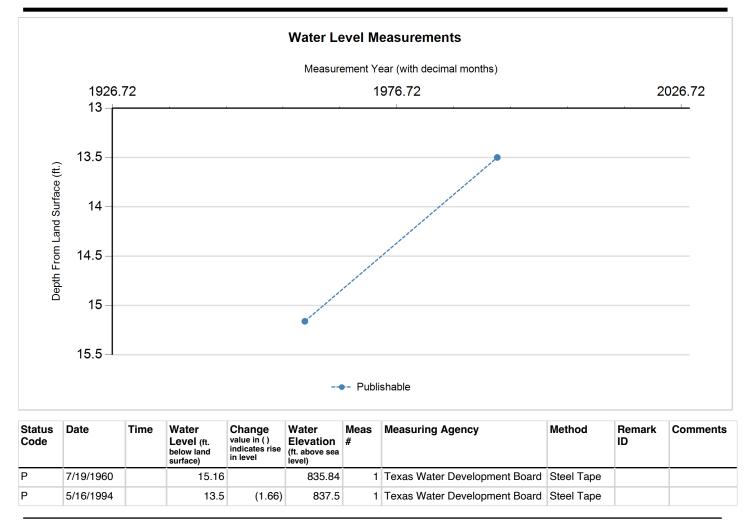
Well Type	Withdrawal of Water
Well Use	Domestic
Water Level Observation	Miscellaneous Measurements
Water Quality Available	Yes
Pump	Jet
Pump Depth (feet below land surface)	
Power Type	Electric Motor
Annular Seal Method	
Surface Completion	
Owner	John O'Neil
Driller	W. A. Stroman
Other Data Available	
Well Report Tracking Number	
Plugging Report Tracking Number	
U.S. Geological Survey Site Number	
Texas Commission on Environmental Quality Source Id	
Groundwater Conservation District Well Number	
Owner Well Number	
Other Well Number	
Previous State Well Number	
Reporting Agency	Texas Water Development Board
Created Date	5/16/1994
Last Update Date	3/4/2020

Remarks Dug well. Four diameter.

Casing						
Diameter (in.)	Casing Type	Casing Material	Schedule	Gauge	Top Depth (ft.)	Bottom Depth (ft.)
48	Blank	Wrought Iron				
Well Tests -	No Data					
Lithology - N	No Data					
Annular Sea	l Range - No D	ata				
Borehole - N	lo Data		Plugg	ed Back - No L	Data	
Filter Pack -	No Data			Pack	ers - No Data	







Code Descriptions





or preserved

Water Quality Analysis

Sample Date:	7/19/1960	Sample Time:	0000	Sample Number:	1	Collection Entity:	U.S. Geological Survey
Sampled Aquife	er: Alluvium						
Analyzed Lab:	U.S. Geologic	cal Survey Lab		Re	eliability	: From well not su	fficiently pumped; not filtered of

Collection Remarks: from storage tank

Parameter Code	Parameter Description	Flag	Value*	Units	Plus/Minus
00415	ALKALINITY, PHENOLPHTHALEIN (MG/L)		0	mg/L	
00410	ALKALINITY, TOTAL (MG/L AS CACO3)		264.75	mg/L as CACO 3	
00440	BICARBONATE ION, CALCULATED (MG/L AS HCO3)		323.09	mg/L	
00910	CALCIUM (MG/L)		90	mg/L	
00445	CARBONATE ION, CALCULATED (MG/L AS CO3)		0	mg/L	
00940	CHLORIDE, TOTAL (MG/L AS CL)		80	mg/L	
00950	FLUORIDE, DISSOLVED (MG/L AS F)		0.9	mg/L	
00900	HARDNESS, TOTAL, CALCULATED (MG/L AS CACO3)		269	mg/L as CACO 3	
00920	MAGNESIUM (MG/L)		11	mg/L	
71851	NITRATE NITROGEN, DISSOLVED, CALCULATED (MG/L AS NO3)		23	mg/L as NO3	
00400	PH (STANDARD UNITS), FIELD		7.5	SU	
71860	RESIDUAL SODIUM CARBONATE, CALCULATED		0		
00955	SILICA, DISSOLVED (MG/L AS SI02)		52	mg/L as SIO2	
00931	SODIUM ADSORPTION RATIO, CALCULATED (SAR)		2.49		
00932	SODIUM, CALCULATED, PERCENT		43	PCT	
00929	SODIUM, TOTAL (MG/L AS NA)	calculate d		mg/L	
00094	SPECIFIC CONDUCTANCE, FIELD (UMHOS/CM AT 25C)		919	MICR	
00945	SULFATE, TOTAL (MG/L AS SO4)		72	mg/L as SO4	
70301	TOTAL DISSOLVED SOLIDS , SUM OF CONSTITUENTS (MG/L)		581	mg/L	





Water Quality Analysis

Sample Date: 5/16/1994 Sample Time: 1530 Sample Number: 1 Collection Entity: Texas Water Development Board Sampled Aquifer: Alluvium

Analyzed Lab: Texas Department of Health

Reliability: Sampled using TWDB protocols

Collection Remarks: No Data

Parameter Code	Parameter Description	Flag	Value*	Units	Plus/Minus
39086	ALKALINITY FIELD DISSOLVED AS CACO3		272	mg/L as CACO 3	
00415	ALKALINITY, PHENOLPHTHALEIN (MG/L)		0	mg/L	
00410	ALKALINITY, TOTAL (MG/L AS CACO3)		275	mg/L as CACO 3	
01503	ALPHA, DISSOLVED (PC/L)	<	4.4	PC/L	
01106	ALUMINUM, DISSOLVED (UG/L AS AL)	<	20	ug/L	
01000	ARSENIC, DISSOLVED (UG/L AS AS)		8.8	ug/L	
01005	BARIUM, DISSOLVED (UG/L AS BA)		118	ug/L	
03503	BETA, DISSOLVED (PC/L)		5.6	PC/L	2.6
00440	BICARBONATE ION, CALCULATED (MG/L AS HCO3)		335.6	mg/L	
01025	CADMIUM, DISSOLVED (UG/L AS CD)	<	2	ug/L	
00915	CALCIUM, DISSOLVED (MG/L AS CA)		144	mg/L	
00445	CARBONATE ION, CALCULATED (MG/L AS CO3)		0	mg/L	
00941	CHLORIDE, DISSOLVED (MG/L AS CL)		174	mg/L	
01030	CHROMIUM, DISSOLVED (UG/L AS CR)	<	10	ug/L	
01040	COPPER, DISSOLVED (UG/L AS CU)		6.9	ug/L	
00950	FLUORIDE, DISSOLVED (MG/L AS F)		0.88	mg/L	
00900	HARDNESS, TOTAL, CALCULATED (MG/L AS CACO3)		422	mg/L as CACO 3	
01046	IRON, DISSOLVED (UG/L AS FE)	<	10	ug/L	
01049	LEAD, DISSOLVED (UG/L AS PB)	<	5	ug/L	
00925	MAGNESIUM, DISSOLVED (MG/L AS MG)		15	mg/L	
01056	MANGANESE, DISSOLVED (UG/L AS MN)	<	2	ug/L	
71890	MERCURY, DISSOLVED (UG/L AS HG)	<	0.13	ug/L	
01060	MOLYBDENUM, DISSOLVED (UG/L AS MO)	<	50	ug/L	
00618	NITRATE NITROGEN, DISSOLVED (MG/L AS N)		9.09	mg/L as N	
71851	NITRATE NITROGEN, DISSOLVED, CALCULATED (MG/L AS NO3)		40.24	mg/L as NO3	
00613	NITRITE NITROGEN, DISSOLVED (MG/L AS N)	<	0.01	mg/L as N	
00608	NITROGEN, AMMONIA, DISSOLVED (MG/L AS N)		0.02	mg/L as N	



Texas Water Development Board (TWDB) Groundwater Database (GWDB) Well Information Report for State Well Number 76-12-301



Parameter Code	Parameter Description	Flag	Value*	Units	Plus/Minus
00623	NITROGEN, KJELDAHL, DISSOLVED (MG/L AS N)		0.3	mg/L as N	
00090	OXIDATION REDUCTION POTENTIAL (ORP), MILLIVOLTS		35.4	MV	
00400	PH (STANDARD UNITS), FIELD		6.74	SU	
00935	POTASSIUM, DISSOLVED (MG/L AS K)		5.4	mg/L	
71860	RESIDUAL SODIUM CARBONATE, CALCULATED		0		
01145	SELENIUM, DISSOLVED (UG/L AS SE)	<	8	ug/L	
00955	SILICA, DISSOLVED (MG/L AS SI02)		53	mg/L as SIO2	
01075	SILVER, DISSOLVED (UG/L AS AG)	<	10	ug/L	
00931	SODIUM ADSORPTION RATIO, CALCULATED (SAR)		2.23		
00932	SODIUM, CALCULATED, PERCENT		35	PCT	
00930	SODIUM, DISSOLVED (MG/L AS NA)		105	mg/L	
01080	STRONTIUM, DISSOLVED (UG/L AS SR)		1340	ug/L	
00946	SULFATE, DISSOLVED (MG/L AS SO4)		107	mg/L as SO4	
00010	TEMPERATURE, WATER (CELSIUS)		22.5	С	
70301	TOTAL DISSOLVED SOLIDS , SUM OF CONSTITUENTS (MG/L)		810	mg/L	
01085	VANADIUM, DISSOLVED (UG/L AS V)		38	ug/L	
01090	ZINC, DISSOLVED (UG/L AS ZN)		32.9	ug/L	

* Value may not display all significant digits for parameter in results, check Scanned Documents for laboratory paperwork..

GWDB DISCLAIMER: Except where noted, all of the information provided in the Texas Water Development Board (TWDB) Groundwater Database (https://www.twdb.texas.gov/groundwater/data/gwdbrpt.asp) is believed to be accurate and reliable; however, the TWDB assumes no responsibility for any errors appearing in rules or otherwise. Further, TWDB assumes no responsibility for the use of the information provided. PLEASE NOTE that users of these data are responsible for checking the accuracy, completeness, currency and/or suitability of all information themselves. TWDB makes no guarantees or warranties as to the accuracy, completeness, currency, or suitability of the information provided via the Groundwater Database (GWDB). TWDB specifically disclaims any and all liability for any claims or damages that may result from providing GWDB data or the information it contains. For additional information or answers to questions concerning the TWDB GWDB, contact the Groundwater Data Team at GroundwaterData@twdb.texas.gov.



Texas Water Development Board (TWDB) Groundwater Database (GWDB) Well Information Report for State Well Number 76-12-302



GWDB Reports and Downloads

Well Basic Details

Scanned Documents

State Well Number	7612302
County	Maverick
River Basin	Rio Grande
Groundwater Management Area	13
Regional Water Planning Area	M - Rio Grande
Groundwater Conservation District	GCD Does Not Exist
Latitude (decimal degrees)	28.869167
Latitude (degrees minutes seconds)	28° 52' 09" N
Longitude (decimal degrees)	-100.532778
Longitude (degrees minutes seconds)	100° 31' 58" W
Coordinate Source	+/- 1 Second
Aquifer Code	100ALVM - Alluvium
Aquifer	Other
Aquifer Pick Method	
Land Surface Elevation (feet above sea level)	876
Land Surface Elevation Method	Interpolated From Topo Map
Well Depth (feet below land surface)	115
Well Depth Source	Driller's Log
Drilling Start Date	
Drilling End Date	7/11/1991
Drilling Method	Air Rotary
Borehole Completion	Perforated or Slotted

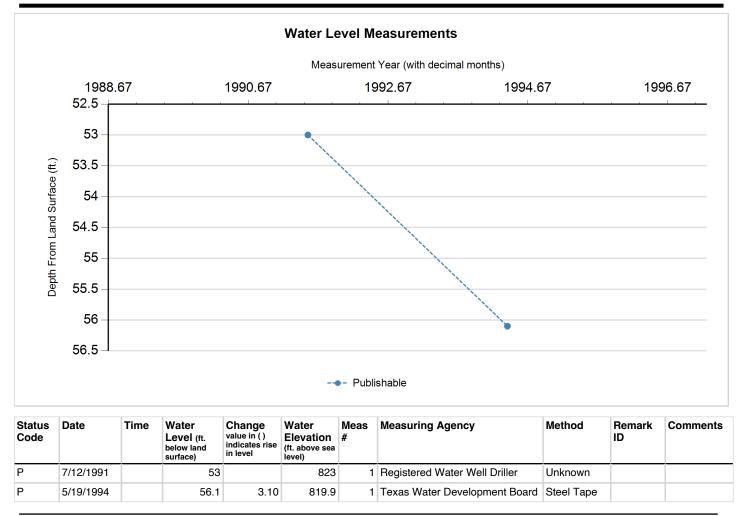
Well Type	Withdrawal of Water
Well Use	Stock
Water Level Observation	Miscellaneous Measurements
Water Quality Available	Yes
Pump	Submersible
Pump Depth (feet below land surface)	
Power Type	Electric Motor
Annular Seal Method	
Surface Completion	
Owner	Burr Ranch
Driller	Spurgeon Drilling Company
Other Data Available	Drillers Log
Well Report Tracking Number	
Plugging Report Tracking Number	
U.S. Geological Survey Site Number	
Texas Commission on Environmental Quality Source Id	
Groundwater Conservation District Well Number	
Owner Well Number	
Other Well Number	
Previous State Well Number	
Reporting Agency	Texas Water Development Board
Created Date	5/17/1994
Last Update Date	3/4/2020

Remarks Reported jetted 15 GPM in 1991.

Casing							
Diameter (in.)	Casing Type	Casing Material	Schedule	Gauge	Top Depth (ft.)	Bottom Depth (ft.)	
4	Blank	Plastic (PVC)			0	55	
4	Screen	Plastic (PVC)			55	75	
4	Blank	Plastic (PVC)			75	95	
4	Screen	Plastic (PVC)			95	115	
Well Tests - Lithology - N							
Annular Sea	l Range - No I	Data					
Borehole - N	lo Data		Plugg	ed Back - No L	Data		
Filter Pack - No Data Packers - No Data							







Code Descriptions





Water Quality Analysis

Sample Date:	5/17/1994	Sample Time:	1130	Sample Number:	1	Collection Entity:	Texas Water Development Board
Sampled Aquif	er: Alluvium						
Analyzed Lab:	Texas Depar	tment of Health		Re	eliability	: Sampled using T	WDB protocols

Collection Remarks: No Data

Parameter Code	Parameter Description	Flag	Value*	Units	Plus/Minus
39086	ALKALINITY FIELD DISSOLVED AS CACO3		218	mg/L as CACO 3	
00415	ALKALINITY, PHENOLPHTHALEIN (MG/L)		0	mg/L	
00410	ALKALINITY, TOTAL (MG/L AS CACO3)		231	mg/L as CACO 3	
01503	ALPHA, DISSOLVED (PC/L)		9.4	PC/L	3.5
01106	ALUMINUM, DISSOLVED (UG/L AS AL)	<	20	ug/L	
01000	ARSENIC, DISSOLVED (UG/L AS AS)		7.2	ug/L	
01005	BARIUM, DISSOLVED (UG/L AS BA)		72.3	ug/L	
03503	BETA, DISSOLVED (PC/L)		9.7	PC/L	3.5
00440	BICARBONATE ION, CALCULATED (MG/L AS HCO3)		281.9	mg/L	
01025	CADMIUM, DISSOLVED (UG/L AS CD)	<	2	ug/L	
00915	CALCIUM, DISSOLVED (MG/L AS CA)		218	mg/L	
00445	CARBONATE ION, CALCULATED (MG/L AS CO3)		0	mg/L	
00941	CHLORIDE, DISSOLVED (MG/L AS CL)		574	mg/L	
01030	CHROMIUM, DISSOLVED (UG/L AS CR)	<	10	ug/L	
01040	COPPER, DISSOLVED (UG/L AS CU)		13.2	ug/L	
00950	FLUORIDE, DISSOLVED (MG/L AS F)		0.8	mg/L	
00900	HARDNESS, TOTAL, CALCULATED (MG/L AS CACO3)		709	mg/L as CACO 3	
01046	IRON, DISSOLVED (UG/L AS FE)	<	10	ug/L	
01049	LEAD, DISSOLVED (UG/L AS PB)	<	5	ug/L	
00925	MAGNESIUM, DISSOLVED (MG/L AS MG)		39	mg/L	
01056	MANGANESE, DISSOLVED (UG/L AS MN)	<	2	ug/L	
71890	MERCURY, DISSOLVED (UG/L AS HG)	<	0.13	ug/L	
01060	MOLYBDENUM, DISSOLVED (UG/L AS MO)	<	20	ug/L	
00618	NITRATE NITROGEN, DISSOLVED (MG/L AS N)		5.57	mg/L as N	
71851	NITRATE NITROGEN, DISSOLVED, CALCULATED (MG/L AS NO3)		24.65	mg/L as NO3	
00613	NITRITE NITROGEN, DISSOLVED (MG/L AS N)	<	0.01	mg/L as N	
00608	NITROGEN, AMMONIA, DISSOLVED (MG/L AS N)		0.01	mg/L as N	



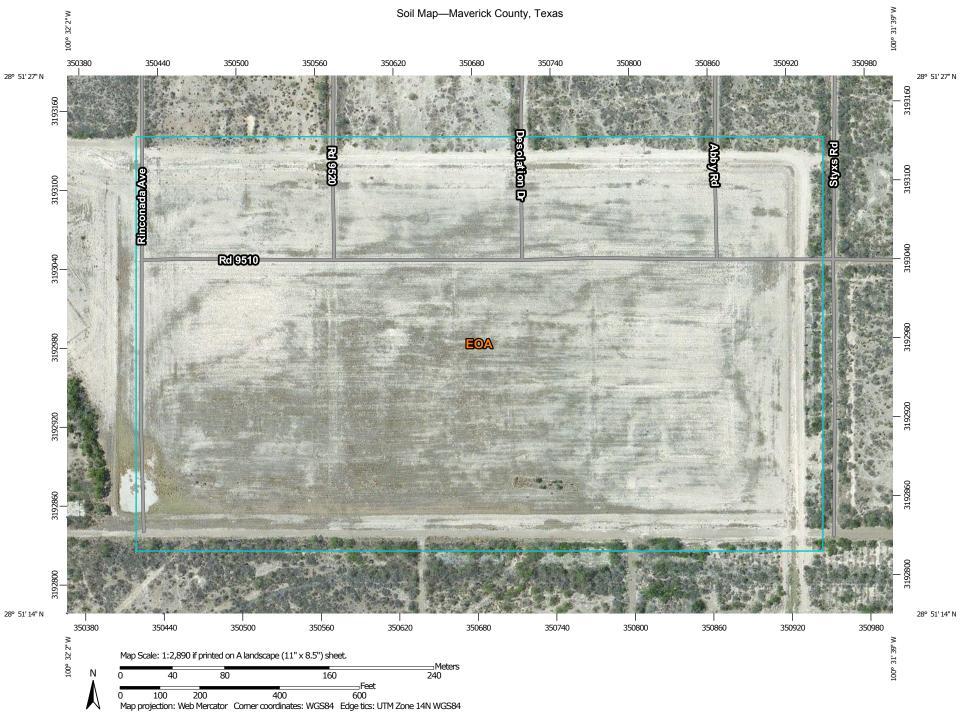
Texas Water Development Board (TWDB) Groundwater Database (GWDB) Well Information Report for State Well Number 76-12-302



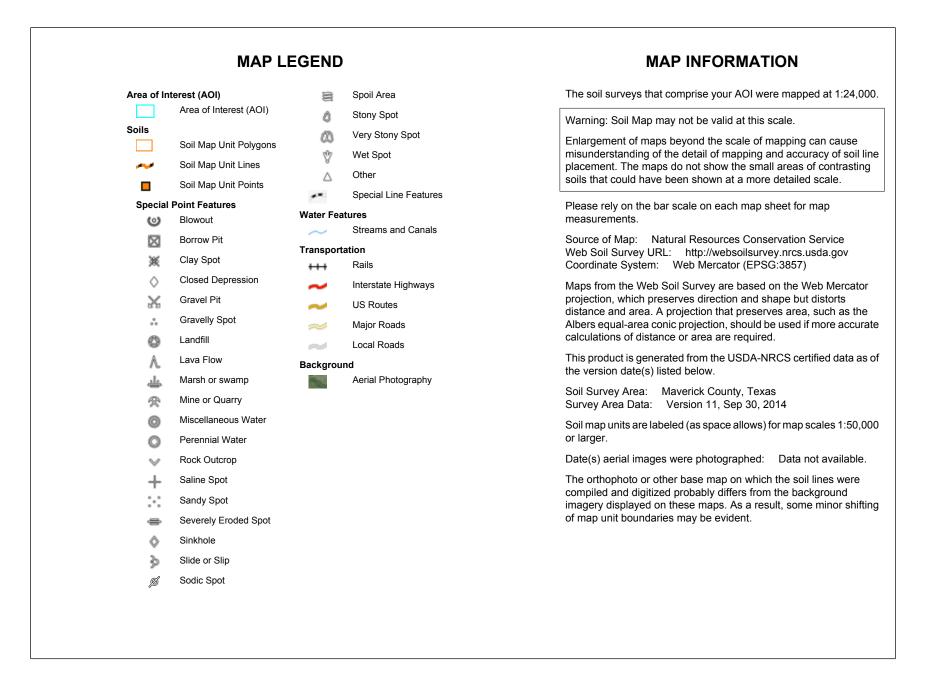
Parameter Code	Parameter Description	Flag	Value*	Units	Plus/Minus
00623	NITROGEN, KJELDAHL, DISSOLVED (MG/L AS N)		0.4	mg/L as N	
00090	OXIDATION REDUCTION POTENTIAL (ORP), MILLIVOLTS		45.6	MV	
00400	PH (STANDARD UNITS), FIELD		6.85	SU	
00935	POTASSIUM, DISSOLVED (MG/L AS K)		6.2	mg/L	
71860	RESIDUAL SODIUM CARBONATE, CALCULATED		0		
01145	SELENIUM, DISSOLVED (UG/L AS SE)	<	8	ug/L	
00955	SILICA, DISSOLVED (MG/L AS SI02)		51	mg/L as SIO2	
01075	SILVER, DISSOLVED (UG/L AS AG)	<	10	ug/L	
00931	SODIUM ADSORPTION RATIO, CALCULATED (SAR)		3.23		
00932	SODIUM, CALCULATED, PERCENT		37	PCT	
00930	SODIUM, DISSOLVED (MG/L AS NA)		197	mg/L	
00094	SPECIFIC CONDUCTANCE, FIELD (UMHOS/CM AT 25C)		1843	MICR	
01080	STRONTIUM, DISSOLVED (UG/L AS SR)		4390	ug/L	
00946	SULFATE, DISSOLVED (MG/L AS SO4)		138	mg/L as SO4	
00010	TEMPERATURE, WATER (CELSIUS)		26.8	С	
70301	TOTAL DISSOLVED SOLIDS , SUM OF CONSTITUENTS (MG/L)		1391	mg/L	
01085	VANADIUM, DISSOLVED (UG/L AS V)		56	ug/L	
01090	ZINC, DISSOLVED (UG/L AS ZN)		13.7	ug/L	

* Value may not display all significant digits for parameter in results, check Scanned Documents for laboratory paperwork..

GWDB DISCLAIMER: Except where noted, all of the information provided in the Texas Water Development Board (TWDB) Groundwater Database (https://www.twdb.texas.gov/groundwater/data/gwdbrpt.asp) is believed to be accurate and reliable; however, the TWDB assumes no responsibility for any errors appearing in rules or otherwise. Further, TWDB assumes no responsibility for the use of the information provided. PLEASE NOTE that users of these data are responsible for checking the accuracy, completeness, currency and/or suitability of all information themselves. TWDB makes no guarantees or warranties as to the accuracy, completeness, currency, or suitability of the information provided via the Groundwater Database (GWDB). TWDB specifically disclaims any and all liability for any claims or damages that may result from providing GWDB data or the information. For additional information or answers to questions concerning the TWDB GWDB, contact the Groundwater Data Team at GroundwaterData@twdb.texas.gov.



USDA Natural Resources Conservation Service Web Soil Survey National Cooperative Soil Survey



Map Unit Legend

Maverick County, Texas (TX323)							
Map Unit Symbol	Map Unit Name	Acres in AOI	Percent of AOI				
EOA	Elindio association, nearly level	41.0	100.0%				
Totals for Area of Interest		41.0	100.0%				

Maverick County, Texas

EOA—Elindio association, nearly level

Map Unit Setting

National map unit symbol: f5lk Elevation: 550 to 700 feet Mean annual precipitation: 17 to 22 inches Mean annual air temperature: 70 to 73 degrees F Frost-free period: 260 to 290 days Farmland classification: Prime farmland if irrigated

Map Unit Composition

Elindio and similar soils: 100 percent *Estimates are based on observations, descriptions, and transects of the mapunit.*

Description of Elindio

Setting

Landform: Interfluves on stream terraces Landform position (three-dimensional): Tread Down-slope shape: Linear Across-slope shape: Linear Parent material: Calcareous loamy alluvium

Typical profile

H1 - 0 to 15 inches: silty clay loam H2 - 15 to 39 inches: clay loam H3 - 39 to 72 inches: clay loam

Properties and qualities

Slope: 0 to 3 percent
Depth to restrictive feature: More than 80 inches
Natural drainage class: Well drained
Capacity of the most limiting layer to transmit water (Ksat): Moderately high to high (0.57 to 1.98 in/hr)
Depth to water table: More than 80 inches
Frequency of flooding: None
Frequency of ponding: None
Calcium carbonate, maximum in profile: 40 percent
Gypsum, maximum in profile: 2 percent
Salinity, maximum in profile: Nonsaline to very slightly saline (0.0 to 4.0 mmhos/cm)
Sodium adsorption ratio, maximum in profile: 2.0
Available water storage in profile: High (about 10.1 inches)

Interpretive groups

Land capability classification (irrigated): 2e Land capability classification (nonirrigated): 4e Hydrologic Soil Group: B Ecological site: Clay loam 18-25" pz (R083BY416TX)

Data Source Information

Soil Survey Area: Maverick County, Texas Survey Area Data: Version 11, Sep 30, 2014

Rainee Trevino

From: Sent: To: Cc:	Natalia Rodriguez Pinilla <natalia@environmentalcgroup.com> Monday, April 28, 2025 10:42 PM Rainee Trevino ehdz68@yahoo.com</natalia@environmentalcgroup.com>
Subject: Attachments:	Re: Application to Renew Permit No. WQ0013716001-Notice of Deficiency Letter Response Letter.docx; 10400.pdf; Admin Page reviewed.pdf; USGS map updated.pdf; Municipal Disposal Renewal Spanish NORI.docx
Categories:	NOD Response Review

Dear Rainee,

I apologize for the delayed response, as I have been out of the country and was only able to address this matter today.

Please find attached the response letter along with all the required documents.

Kindly let me know if there is anything further needed on my end.

Thank you for your time and assistance.

Best regards,

Natalia Rodriguez 832-776-5393 From: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Date: Monday, April 14, 2025 at 3:23 PM
To: Natalia Rodriguez Pinilla <natalia@environmentalcgroup.com>
Cc: ehdz68@yahoo.com <ehdz68@yahoo.com>
Subject: Application to Renew Permit No. WQ0013716001-Notice of Deficiency Letter

Dear Ms. Rodriguez,

The attached Notice of Deficiency letter sent on April 14, 2025, requests additional information needed to declare the application administratively complete. Please send the complete response to my attention by April 28, 2025.

Regards,

Rainee Trevino Water Quality Division | ARP Team Texas Commission on Environmental Quality 512-239-4324



April 26, 2025

Rainee Trevino Applications Review and Processing Team (MC148) Water Quality Division Texas Commission on Environmental Quality P.O. Box 13087 Austin, Texas 78711-3087

Re: Response to Notice of Deficiency Permit No. WQ0013716001 Maverick County (CN600640015) Radar Base Wastewater Treatment Plant (RN101607224)

Dear Ms. Trevino,

On behalf of Maverick County, please find attached our responses to the Notice of Deficiency (NOD) dated April 14, 2025:

1. Original Paper Copy of Application:

• The original paper copy of the application has been mailed to the Texas Commission on Environmental Quality. Proof of mailing is attached.

2. Core Data Form - Section III, Item #22:

• An updated Core Data Form including the site name has been completed and attached.

3. Core Data Form - Section III, Item #26:

• An updated Core Data Form with the state, zip code, and nearest city where the facility is located has been completed and attached.

4. Administrative Report 1.0, Section 4, Item A:

• An updated section of the application including the state and zip code for the mailing address of the applicant contact has been prepared and attached.

5. USGS Topographic Map:

• An updated USGS Topographic Map with the applicant's property boundary labeled has been completed and attached.

6. **Review of NORI Portion:**

• We have reviewed the portion of the NORI provided and confirm that it is correct. No errors or omissions were identified.

7. Spanish Translation of the NORI:

• The Spanish translation of the NORI has been prepared according to the template provided and is attached in a Microsoft Word document.

We trust that the enclosed documents and responses address the items identified in the Notice of Deficiency. Should you require any additional information or clarification, please do not hesitate to contact me.

Thank you for your assistance.

Sincerely,

Natalia Rodriguez Consultant

If the co-applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at: <u>http://www15.tceq.texas.gov/crpub/</u>

CN: <u>N/A</u>

What is the name and title of the person signing the application? The person must be an executive official meeting signatory requirements in *30 TAC § 305.44*.

Prefix: <u>N/A</u>	Last Name, First Name: <u>N/A</u>
Title: <u>N/A</u>	Credential: <u>N/A</u>

Provide a brief description of the need for a co-permittee: <u>N/A</u>

C. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of Administrative Report 1.0. <u>Attachment 2</u>

Section 4. Application Contact Information (Instructions Page 27)

This is the person(s) TCEQ will contact if additional information is needed about this application. Provide a contact for administrative questions and technical questions.

A.	Prefix: <u>Miss</u> Last Name, First Name: <u>Natalia Rodriguez</u>							
	Title: <u>Consultant</u>	Credential: Click to enter text.	itial: Click to enter text.					
	Organization Name: <u>ECG</u>							
	Mailing Address: <u>921 E 800 S</u>	City, State, Zip Code: <u>S</u>	Salt Lake City, UT 84102					
	Phone No.: <u>832-776-5393</u>	E-mail Address: <u>natalia@environ</u>	<u>mentalcgroup.com</u>					
	Check one or both: \square A	Administrative Contact	Technical Contact					
B.	B. Prefix: <u>Mr.</u> Last Name, First Name: <u>Ernie Hernandez</u>							
	Title: <u>County Water Works Operator</u> Credential: <u>n/a</u>							
	• •							
	Organization Name: Maverick							
		County	agle Pass, TX 78852					
	Organization Name: <u>Maverick</u>	County	-					
	Organization Name: <u>Maverick</u> Mailing Address: <u>500 Quarry Stre</u> Phone No.: <u>830-352-4281</u>	<u>County</u> eet Suite 3 City, State, Zip Code: <u>E</u>	-					

Section 5. Permit Contact Information (Instructions Page 27)

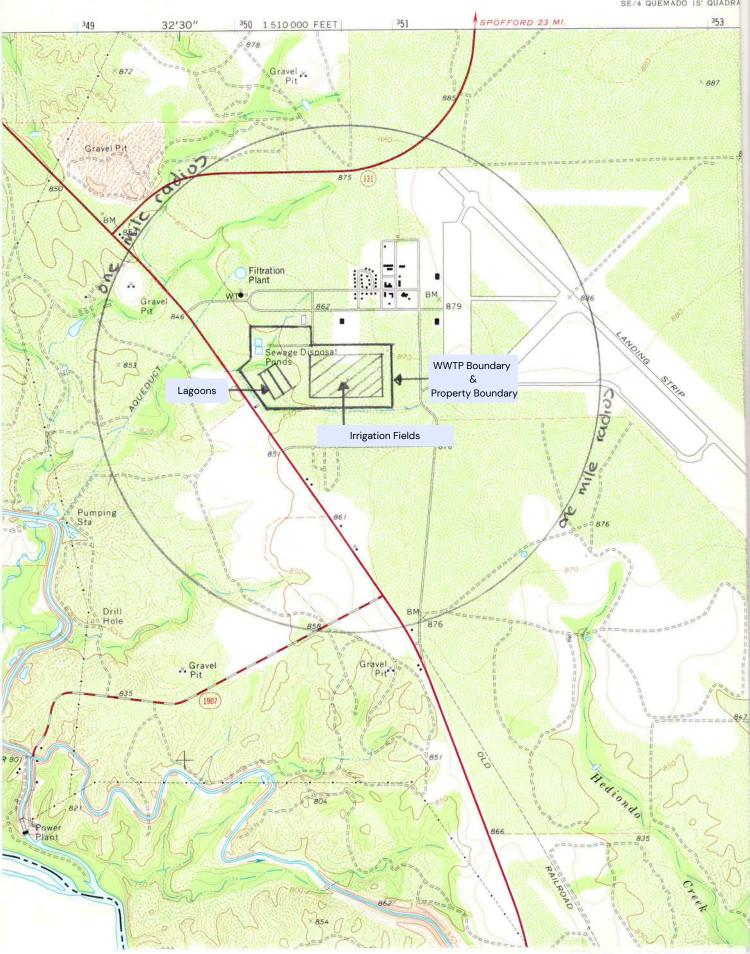
Provide the names and contact information for two individuals that can be contacted throughout the permit term.

A.	Prefix: <u>Mr.</u>	Last Name	e, First Name: <u>Ernie Hernandez</u>
	Title: County Water Works Operator	Credential	: Click to enter text.
	Organization Name: Maverick Cour	<u>nty</u>	
	Mailing Address: 500 Quarry Street S	Suite 3	City, State, Zip Code: Eagle Pass, TX 78852
	Phone No.: <u>830-352-4281</u>	E-mail Ad	ldress: <u>ehdz68@yahoo.com</u>

QUEMADO SE QUAD

TEXAS-MAVERICH

7.5 MINUTE SERIES (TOF SE/4 QUEMADO 15' QUADRA



Comisión de Calidad Ambiental del Estado de Texas



AVISO DE RECIBO DE LA SOLICITUD E INTENCION DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA RENOVACION

PERMISO NO. WQ00

SOLICITUD. Maverick County, 500 Quarry Street, Suite 3, Eagle Pass, Texas 78852, ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) para renovar el Permiso No. WQ0013716001 de disposición de aguas residuales para autorizar la disposición de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 200,000 galones por día mediante irrigación superficial en 60 acres de terreno sin acceso público. La planta de tratamiento de aguas domésticos residuales y el área de disposición están ubicados aproximadamente 4,300 pies al sureste de la intersección de U.S. Highway 277 y State Highway 131, cerca de la ciudad de Eagle Pass, en el Condado de Maverick, Texas 78852. La TCEQ recibió esta solicitud el 10 de abril de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Maverick County Courthouse, County Judge's Office, 500 Quarry Street, Suite 3, Eagle Pass, en el Condado de Maverick, Texas antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web:

https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-100.535555,28.856666&level=18

AVISO DE IDIOMA ALTERNATIVO. El aviso de idioma alternativo en español está disponible en <u>https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications</u>.

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar comentarios públicos o pedir una reunión pública sobre esta solicitud. El propósito de una reunión pública es dar la oportunidad de presentar comentarios o hacer preguntas acerca de la solicitud. La TCEQ realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO. Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso. Una audiencia administrativa de lo contencioso una audiencia administrativa de lo contencioso una audiencia administrativa de lo contencioso. Una audiencia administrativa de lo contencioso.

PARA SOLICITAR UNA AUDIENCIA DE CASO IMPUGNADO, USTED DEBE INCLUIR EN SU SOLICITUD LOS SIGUIENTES DATOS: su nombre, dirección, y número de teléfono; el nombre del solicitante y número del permiso; la ubicación y distancia de su propiedad/actividad con respecto a la instalación; una descripción específica de la forma cómo usted sería afectado adversamente por el sitio de una manera no común al público en general; una lista de todas las cuestiones de hecho en disputa que usted presente durante el período de comentarios; y la declaración "[Yo/nosotros] solicito/solicitamos una audiencia de caso impugnado". Si presenta la petición para una audiencia de caso impugnado de parte de un grupo o asociación, debe identificar una persona que representa al grupo para recibir correspondencia en el futuro; identificar el nombre y la dirección de un miembro del grupo que sería afectado adversamente por la planta o la actividad propuesta; proveer la información indicada anteriormente con respecto a la ubicación del miembro afectado y su distancia de la planta o actividad propuesta; explicar cómo y porqué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión.

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado especifico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en <u>www.tceq.texas.gov/goto/cid</u>. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

CONTACTOS E INFORMACIÓN A LA AGENCIA. Todos los comentarios públicos y solicitudes deben ser presentadas electrónicamente vía

http://www14.tceq.texas.gov/epic/eComment/ o por escrito dirigidos a la Comisión de Texas de Calidad Ambiental, Oficial de la Secretaría (Office of Chief Clerk), MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Tenga en cuenta que cualquier información personal que usted proporcione, incluyendo su nombre, número de teléfono, dirección de correo electrónico y dirección física pasarán a formar parte del registro público de la Agencia. Para obtener más información acerca de esta solicitud de permiso o el proceso de permisos, llame al programa de educación pública de la TCEQ, gratis, al 1-800-687-4040. Si desea información en Español, puede llamar al 1-800-687-4040.

También se puede obtener información adicional del *Condado de Maverick* a la dirección indicada arriba o llamando a *Ernie Hernandez* al *830-773-4747*

Fecha de emisión [Date notice issued]

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(830) 773-3824		() -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity" is selected, a new permit application is also required.)									
New Regulated Entity	🗌 New Regulated Entity 🛛 🖾 Update to Regulated Entity Name 🔄 Update to Regulated Entity Information								
The Regulated Entity Na	The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such								
	ne submittee	may be apaatea, m	order to mee		butu stun		guinzation	ui chunigo such	
as Inc, LP, or LLC).									
22. Regulated Entity Nam	ne (Enter name	of the site where the r	egulated action	is taking plac	ce.)				
The Radar Base Wasteater Tr	reatment Facili	.y							
23. Street Address of									
the Regulated Entity:									
the Regulated Entity.									
(No DO Reveal		T				1		n	
<u>(No PO Boxes)</u>	City		State		ZIP		ZIP + 4		
24 Country	Maverick	I				1		L	
24. County	IVIAVEFICK								
If no Street Address is provided, fields 25-28 are required.									

25. Description to Physical Location:	Approximately 4,300 feet southweast of the intersection of U.S. Highway 277 and State Highway 131, in mAVERICK COUNTY, TEXAS								
26. Nearest City State Nearest ZIP Code									
Eagle Pass Tx 78852									
Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).									
27. Latitude (N) In Decim	al:	28°51'20.56"N		28. Loi	ngitude (V	V) In Decii	mal:	100°32'8.	13"W
Degrees	Minutes	Se	conds	Degree	S	N	linutes		Seconds
29. Primary SIC Code	30.	Secondary SIC Co	de	31. Primary		ode	32. Secon	dary NAI	CS Code
(4 digits)	(4 d	igits)		(5 or 6 digits))		(5 or 6 digi	ts)	
4952	4952 22132								
33. What is the Primary E	Business of t	his entity? (Do n	ot repeat the SIC or	NAICS descrip	otion.)				
government									
	500 Quarr	y Street, Suite 3							
34. Mailing									
Address:	City	Eagle Pass	State	тх	ZIP	78852		ZIP + 4	
	<u> </u>								
35. E-Mail Address:	jess	ica.gonzalez@co.ma	averick.tx.us						
36. Telephone Number		3	37. Extension or (Code	38. F	ax Numbe	er (if applicabl	e)	
(830) 773-3824	(830)773-3824 () -								